Case 16-01909 Doc 1 Filed 01/22/16 Entered 01/22/16 10:17:39 Desc Main Document Page 1 of 94 To The STATES BANKRUPTCY COURT UNITED STATES BANKRUPTCY OF ILLINOIS NORTHERN DISTRICT OF ILLINOIS

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

JAN 22 2016

JAN 28 2016

JEFFREY P. ALLETEAUT, CLERK
PER REP. CA

Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	KAHNEIDGA	FILED
identification (for example, your driver's license or		First name KA-AQUA	First LINITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
	passport). Bring your picture	Middle name HARRIS	Middle name JAN 22 2016
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	SUTJETFREY P. ALLSTEADT, CLERK PS REP CA
2.	All other names you	ataran kan kan kan kan kan kan kan kan kan k	
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
15-100 PG			
3.	Only the last 4 digits of	xxx - xx - 5 3 6 7	xxx - xx
	your Social Security number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1

KHANEIDGA KA-AQUA HARRIS

COLUMNIA	NEIDON NA-	AMON LINKKIO	
First Name	Middle Name	Last Name	

Case number	(if known)	

52.50		About Debtor 1:		About Debtor 2 (Spo	ouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (FIN) you have used in		☐ I have not used any busin	ness names or EINs.	☐ I have not used any business names or EINs.			
	(EIN) you have used in the last 8 years	Business name		Business name			
	Include trade names and	Datinos namo	•	Dusiness name			
	doing business as names	Business name		Business name	,		
		EIN		EIN			
		EIN		EIN — - — —			
STANDER	and transfer that the selection of a second content of the second						
5.	Where you live			If Debtor 2 lives at a	different address:		
		413 WEBB ST					
		Number Street		Number Street	The state of the s		
		4900000			A STATE OF THE STA		
		CALUMET CITY City	IL 60409 State ZIP Code	City	State ZIP Code		
		COOK					
		County If your mailing address is di above, fill it in here. Note tha any notices to you at this mail	at the court will send	If Debtor 2's mailing yours, fill it in here. No any notices to this mail	address is different from lote that the court will send ing address.		
		Number Street	1-74-7-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	Number Street			
		P.O. Box		P.O. Box			
		City	State ZIP Code	City	State ZIP Code		
6.	Why you are choosing	Check one:	PROTOT BERNATUR AND	Check one:			
	this district to file for bankruptcy	Over the last 180 days beful have lived in this district leads other district.	ore filing this petition, onger than in any	Over the last 180 de I have lived in this d other district.	ays before filing this petition, listrict longer than in any		
		I have another reason. Exp (See 28 U.S.C. § 1408.)	olain.	I have another reas (See 28 U.S.C. § 14	on. Explain. 108.)		
				<u> </u>	· · · · · · · · · · · · · · · · · · ·		

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Debtor 1

KHANEIDGA KA-AQUA HARRIS
First Name Middle Name Last Name

Case number (if known)_____

P	art 2: Tell the Court Abo	ut Your I	ankru	ptcy Case						
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	are choosing to file under	☑ Chapter 7								
		☐ Chapter 11								
		☐ Chapter 12								
		☐ Cha	pter 13	3						
8.	How you will pay the fee	loca you subi	f court self, yo nitting	pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee self, you may pay with cash, cashier's check, or money order. If your attorney is sitting your payment on your behalf, your attorney may pay with a credit card or check a pre-printed address.						
		☐ I ne	ed to p	ay the fee in installment	s. If yo	ou choose this or	otion, sign and attach the			
		App	ication	for Individuals to Pay The	Filing	Fee in Installme	ents (Official Form 103A).			
10. A 14 a 1800 a 1800 a		By la less pay	aw, a ju than 1: the fee	udge may, but is not require 50% of the official poverty	ed to, line th oose ti	waive your fee, a lat applies to you his option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.			
9.	Have you filed for bankruptcy within the	□ No		NORTHEDNIN IN INOI		40/04/0000	0040704DQU			
	last 8 years?	✓ Yes.	District	NORTHERN ILLINOI	_ When	MM / DD / YYYY	Case number 0948734PSH			
			District		When		Case number			
			M:-1-1-1							
			District	y year the defendance was also the second	_ When	MM / DD / YYYY	Case number			
10.	Are any bankruptcy	⊿ No								
	cases pending or being filed by a spouse who is	☐ Yes.	Debtor	**************************************			Relationship to you			
	not filing this case with you, or by a business partner, or by an affiliate?		District		When	MM/DD/YYYY	Case number, if known			
			Debtor			-1-1-1-1-1	Relationship to you			
							Case number, if known			
11.	Do you rent your residence?	☐ No. ☑ Yes.	Go to I Has yo	our landlord obtained an evicti	on judg	ment against you	and do you want to stay in your			
			☑ No	. Go to line 12.						
			☐ Ye		out an	Eviction Judgment	Against You (Form 101A) and file it with			

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Debtor 1

KHANEIDGA KA-AQUA HARRIS First Name Middle Name Last Name

Case number (if known)_

2. Are you a sole proprietor	☑ No. Go to Part 4.							
of any full- or part-time business?	☐ Yes	Yes. Name and location of business						
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any						
LLC. If you have more than one sole proprietorship, use a separate sheet and attach it		Number Street	7 - W 4 1 17 - H 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
to this petition.		City	 	State	ZIP Code			
		Check the appropriate bo	ox to describe you	r business:				
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))						
		☐ Single Asset Real Es	Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
		☐ Stockbroker (as defin	ed in 11 U.S.C. §	101(53A))				
		Commodity Broker (as defined in 11 U.S.C. § 101(6))						
		☐ None of the above						
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	any of the	et appropriate deadlines. If you indicate that you are a small business debtor, you must attach your recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if f these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). D. I am not filing under Chapter 11. D. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Description:						
• • • • • • • • • • • • • • • • • • • •	Yes.	I am filing under Chapter			~			
	☐ Yes.	Bankruptcy Code.			•			
- · · · · · · · · · · · · · · · · · · ·		Bankruptcy Code.	erty or Any Pro	perty That Nee	eds Immediate Attention			
- · · · · · · · · · · · · · · · · · · ·	or Have	Bankruptcy Code.	erty or Any Pro	perty That Nee				
art 4: Report if You Own Do you own or have any property that poses or is		Bankruptcy Code.	erty or Any Pro	perty That Nee				
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	or Have	Bankruptcy Code. Any Hazardous Prope	erty or Any Pro	perty That Nee				
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	or Have	Any Hazardous Property What is the hazard?						
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	or Have	Any Hazardous Property What is the hazard?			eds Immediate Attention			
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	or Have	Any Hazardous Prope What is the hazard? If immediate attention is	needed, why is it		eds Immediate Attention			
Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	or Have	Any Hazardous Prope What is the hazard? If immediate attention is	needed, why is it	needed?	eds Immediate Attention			

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Debtor 1

KHANEIDGA KA-AQUA HARRIS

Case number (if known)	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor	1:				100	O
	3	100	MARA	300	1111	ñ.,

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing al	oou
credit counseling because of:	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	a	briefing	about
cred	it co	unseling	be	ecause d)f	-	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

KHANEIDGA KA-AQUA HARRIS
First Name Middle Name Last Name

Case number (it known)		

16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
		16b. Are your debts prima	rily business debts? Business debts vestment or through the operation of the	are debts that you incurred to obtain business or investment.		
		□ No. Go to line 16c.□ Yes. Go to line 17.				
		16c. State the type of debts you	u owe that are not consumer debts or bu	siness debts.		
	Are you filing under Chapter 7?	☐ No. I am not filing under C	napter 7. Go to line 18.	oka da para da		
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapt administrative expense No Yes	er 7. Do you estimate that after any exeres are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?		
	How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
,	How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	rt 7: Sign Below	I have examined this petition, ar	nd I declare under penalty of perjury that	the information provided is true and		
Foi	ryou	correct. If I have chosen to file under Ch	apter 7, I am aware that I may proceed, understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13		
		If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone and read the notice required by 11 U.S.C	who is not an attorney to help me fill out C. § 342(b).		
		I request relief in accordance wi	th the chapter of title 11, United States C	Code, specified in this petition.		
		I understand making a false stat with a bankruptcy case can resu 18 U.S.C. \$\$ 152, 1341, 1519	Ilt in fines up to \$250,000, or imprisonme	money or property by fraud in connection ent for up to 20 years, or both.		
		Khaneidga K. Harris	*			
		Signature of Debtor 1	Signature	e of Debtor 2		
		Executed on 01/13/2016	Executed (YYY)	i on		

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otor 1 KHANEIDGA First Name Middle Nam	KA-AQUA HARRIS Last Name	Case number (# known)			
your attorney, if you are resented by one ou are not represented an attorney, you do not d to file this page.	to proceed under Chapter 7, 11, 12, or 13 of tavailable under each chapter for which the pethe notice required by 11 U.S.C. § 342(b) and	in this petition, declare that I have informed the debtor(s) about e 13 of title 11, United States Code, and have explained the relief the person is eligible. I also certify that I have delivered to the de(b) and, in a case in which § 707(b)(4)(D) applies, certify that I harmation in the schedules filed with the petition is incorrect.			
	Signature of Attorney for Debtor	Date	MM		DD /YYYY
	Printed name				
	Firm name				
	Number Street			•	
	City	State	ZIP C	ode	****
	Contact phone	Email address			
	Bar number	State			

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Debtor 1

KHANEIDGA KA-AQUA HARRIS

Eiret Mare

Middle Name

Last Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

be familiar with any state exemption laws that apply.	
Are you aware that filing for bankruptcy is a serious acconsequences? No Yes	ction with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprise No Yes	, •
Did you pay or agree to pay someone who is not an at ✓ No ✓ Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, De	
By signing here, I acknowledge that I understand the relation have read and understood this notice, and I am aware attorney may cause me to lose my rights or property if Khaneidga K Harris Signature of Debtor 1	that filing a bankruptcy case without an
Date 01/13/2016 MM / DD / YYYY	Date MM / DD / YYYY
Contact phone (708) 574-8844	Contact phone
Cell phone	Cell phone
Email address neijia4@hotmail.com	
Email address Ticijia Tourian.com	Email address

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Official	Form 106	SA/R		amended filing
Case number			Bankha Andrew 1904	Check if this is a
United States	Bankruptcy Court fo	or the: Northern District of I	linois	•
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name	
Depto: 1	First Name	Middle Name	Last Name	
Debtor 1	Khaneidga K	. Harris		

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Part 1:

Yes. Where is the property? 1. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemption the amount of any secured claims on Sche Creditors Who Have Claims Secured by P.		
	Manufactured or mobile home	entire property?	portion you own?	
<u> </u>	Land	\$	\$	
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of your owners interest (such as fee simple, tenance the entireties, or a life estate), if known is the entireties.		
	Who has an interest in the property? Check one.	•	,,	
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property	
	At least one of the debtors and another	om augh as least		
	☐ At least one of the debtors and another Other information you wish to add about this it property identification number:			
ou own or have more than one, list here:	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:	
	Other information you wish to add about this it property identification number: What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put d claims on Schedule D ns Secured by Property.	
	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D ns Secured by Property. Current value of th	
,	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$	
Street address, if available, or other description	Other information you wish to add about this it property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Describe the nature of interest (such as fee	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$	

Case 16-01909 Doc 1 Filed 01/22/16 Entered 01/22/16 10:17:39 Document Page 10 of 94 Khaneidga K. Harris Debtor 1 Case number (if know What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership ZIP Code City Timeshare interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No No Chevrolet Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only colbot Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2008 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 148000 portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: 0.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 32 Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another

Other information:

instructions)

Check if this is community property (see

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ebtor 1	Khaneidga K. Harris First Name Middle Name	Last Name Case	number (if known	")	
	rest raise squire same	Lastivanie			
	Make:	Who has an interest in the property?	Check one.	Do not deduct secured cla	
3.3.		Debtor 1 only	ŧĮ	he amount of any secure	d claims on <i>Schedule D:</i>
	Model:	Debtor 2 only	٠. :	Creditors Who Have Clair	ns Securea by Property.
	Year:	─ □ Debtor 1 and Debtor 2 only		Current value of the	Current value of th
	Approximate mileage:	At least one of the debtors and another	е	entire property?	portion you own?
	Other information:		4		
		☐ Check if this is community propert instructions)	y (see \$		\$
		Who has an interest in the property?	Check one	Do not deduct secured cla	en, viče si, i e
3.4.	Make:	Debtor 1 only	th	he amount of any secure	d claims on Schedule D:
	Model:	Debtor 2 only		Creditors Who Have Clain	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	C	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	е	entire property?	portion you own?
	Other information:				
		Check if this is community propert instructions)	y (see \$		\$
Exam	ples: Boats, trailers, motors, person o	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions)	theck one. p	3	d claims on Schedule Dons Secured by Property.
Exam. No. Ye 4.1.	ples: Boats, trailers, motors, person on the session of the sessio	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Te: Who has an interest in the property? O	le accessories theck one. D tr c c g y (see \$	o not deduct secured classes amount of any secured creditors Who Have Clain Current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
Exam. No. Ye 4.1.	ples: Boats, trailers, motors, person bes Make: Model: Year: Other information: own or have more than one, list he Make: Model:	Who has an interest in the property? Co. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another instructions)	theck one. p	on not deduct secured claime amount of any secured claim current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ss Secured by Property. Current value of th portion you own? \$
Exam. No. Ye 4.1.	ples: Boats, trailers, motors, person on the session of the sessio	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Te: Who has an interest in the property? O Debtor 1 only	theck one. Definition of the ck one. Definit	on not deduct secured claime amount of any secured creditors Who Have Claim current value of the entire property? To not deduct secured claime amount of any secured creditors Who Have Claim current value of the current value of the	ims or exemptions. Put I claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
Exam. No. Ye 4.1.	ples: Boats, trailers, motors, person bes Make: Model: Year: Other information: own or have more than one, list he Make: Model:	Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) The cets Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 2 only	theck one. Definition of the ck one. Definit	on not deduct secured claime amount of any secured claim current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
Exam. No. Ye 4.1.	ples: Boats, trailers, motors, person on the series of the	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Te: Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only	theck one. Ditheck	on not deduct secured claime amount of any secured creditors Who Have Claim current value of the entire property? To not deduct secured claime amount of any secured creditors Who Have Claim current value of the current value of the	ims or exemptions. Put I claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
Exam. No. Ye 4.1.	ples: Boats, trailers, motors, person on the series of the	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Te: Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property	theck one. Ditheck	on not deduct secured claime amount of any secured creditors Who Have Claim current value of the entire property? To not deduct secured claime amount of any secured creditors Who Have Claim current value of the current value of the	ims or exemptions. Put d claims on Schedule D: ins Secured by Property. Current value of the portion you own? \$
Exam	ples: Boats, trailers, motors, person on the person of the	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Te: Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions)	theck one. Ditheck	on not deduct secured claime amount of any secured reditors Who Have Claim current value of the entire property? The amount of any secured claim control deduct secured claim creditors Who Have Claim current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ins Secured by Property. Current value of the portion you own? \$ ims or exemptions. Put d claims on Schedule D: ins Secured by Property. Current value of the portion you own?
Exam	ples: Boats, trailers, motors, person on the ses of the	Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Te: Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property	theck one. Ditheck	on not deduct secured claime amount of any secured creditors Who Have Claim current value of the entire property? On not deduct secured claime amount of any secured creditors Who Have Claim current value of the entire property?	ims or exemptions. Put d claims on Schedule D: ins Secured by Property. Current value of th portion you own? \$ ims or exemptions. Put d claims on Schedule D: ins Secured by Property. Current value of th portion you own?

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Debtor 1

Khaneidga	K.	Harris
First Name	Mic	ide Name

Last Name

Case number (if known)_____

Part 3: Describe Your Personal and Household Items	
Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
☐ No ☐ Yes. Describe	\$1,500.00
/ Electronics	j
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
☐ Yes. Describe 3 tv, one computer	\$1,300.00
Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles 2 No	
Yes. Describe	\$
 Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No 	
Yes. Describe	\$
0. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ✓ No	
Yes. Describe	\$
1. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
☑ Yes. Describe clothing jeans sweaters shoes	\$300.00
 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver 	
☑ No ☐ Yes. Describe	\$
3. Non-farm animals	
Examples: Dogs, cats, birds, horses	
Yes. Describedog	\$ 200.00
4. Any other personal and household items you did not already list, including any health aids you did not list	
☑ No	
Yes. Give specific information	\$
5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$ 3,300.00

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Debtor 1

Khane	idaa	K.	Harris
	i u u u	1	HUHIO

Case number (if known)_

Part 4: Describe Yo	our Financial Assets			
Do you own or have any	r legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash				
	have in your wallet, in your ho	me, in a safe deposit box, and on hand when	you file your petition	
☑ No				
☐ Yes			Cash:	\$
		ounts; certificates of deposit; shares in credit u multiple accounts with the same institution, list		
2 No				
☐ Yes		Institution name:		
	47.4 Observing account			o-
	17.1. Checking account:	and the state of t		\$
	17.2. Checking account:	And a property of the second o		\$
	17.3. Savings account:			\$
	17.4. Savings account:		**************************************	\$
	17.5. Certificates of deposit:		<u> </u>	\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:	***************************************		\$
	17.9. Other financial account:	Management of the Control of the Con		\$
	or publicly traded stocks	kerage firms, money market accounts		
☑ No	, in todarion addounted that bron	crago ilino, mono, manor account		
Q Yes	Institution or issuer name:			
				\$
				\$
			ALVENZAMMENTALIZAMUINSTRANDERMANATANIA TARIATANIA TARIA	\$
19. Non-publicly traded s an LLC, partnership,	-	orated and unincorporated businesses, inc	luding an interest in	
☑ No	Name of entity:		% of ownership:	
Yes. Give specific information about			0%%	\$
them	<u></u>		0%%	\$
			%	\$

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Khaneidga K. Harris Case number (if known)_ Debtor 1 Last Name First Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Z No Issuer name: ☐ Yes. Give specific information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others 🛭 No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: ____ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) M No ☐ Yes..... Issuer name and description:

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Debtor 1 Khaneidga K. Harri		Case number (if known)	
First Name Middle Name	Last Name		
		1	
24. Interests in an education IRA, in 26 U.S.C. §§ 530(b)(1), 529A(b), a		program, or under a qualified state tuition program.	
☑ No			
n	titution name and description. Sep-	arately file the records of any interests.11 U.S.C. § 521(c	c) :
1110		, , , , , , , , , , , , , , , , ,	, <u>.</u>
_			\$
			\$
			\$
**	and the second section of the second section of the second section of the second section secti	the listed in time d) and sinks	
25. Trusts, equitable or future intere exercisable for your benefit	sts in property (other than anyth	ing listed in line 1), and rights or powers	
☑ No			
Yes. Give specific			owners of
information about them			\$
horaconomic			munk
 Patents, copyrights, trademarks Examples: Internet domain names 			
No	, process nom royalics	and noticing agreements	
Yes. Give specific	n yan dayilga dagama adaga is baga bagain dahi isah ada ada ada ada ada ada ada ada ada a		Towns of the state
information about them			\$
	oka halimba da)
7. Licenses, franchises, and other		an haldings the san harman and the san haldings the san h	
•	ive licenses, cooperative associati	on holdings, liquor licenses, professional licenses	
☑ No			~
Yes. Give specific information about them			\$
			J -
Money or property owed to you?			Current value of the
			portion you own? Do not deduct secured
	ALEXANDER OF A STATE O	一个一个一个工程,但是是一个工程,但是	claims or exemptions.
8. Tax refunds owed to you			
☑ No			
☐ Yes. Give specific information	з колона в се концият в концият в концият в настрой в принция в настрой в больной в достой в настрой в настрой	Federal:	\$
about them, including whe you already filed the return			\$
and the tax years.			\$
20 Family support			
 Family support Examples: Past due or lump sum a 	limony, spousal support, child supp	port, maintenance, divorce settlement, property settleme	nt
☑ No	·		
Yes. Give specific information			
*		Alimony:	\$
	12.74 margins (2.74 margins)	Maintenance:	\$
	STATE OF THE STATE	Support:	\$
	The state of the s	Divorce settlement:	\$
		Property settlement:	\$
0. Other amounts someone owes y	ou	<u> </u>	
	y insurance payments, disability be ; unpaid loans you made to someo	nefits, sick pay, vacation pay, workers' compensation, ne else	
No	, and to also you made to come		
Yes. Give specific information	funcionario anciente accoministrativa de esta de formación las la crimidad de coniceria e calcinia de cididad de la coniceria de cididad de cididad de cididad de cididad del coniceria de cididad de cididad de cididad de cididad de cididad de cididad del cididad de cidid	у жаранда жаранда жаранда тарын түрөнүн дама тарын та	
a case and a promoting the company of	1000000		\$

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D	ebtor 1		a K. Harris		se number (if known)	
		First Name	Middle Name	Last Name		
31	. Interests	in insuranc	e policies			
			•	nce; health savings account (HSA); credit, homeowr	ner's, or renter's insurance	
	☑ No					
			urance company y and list its value	Company name:	Beneficiary:	Surrender or refund value:
						\$
						\$
						\$
32	If you are property b	the benefici	•	from someone who has died expect proceeds from a life insurance policy, or are of	currently entitled to receive	
	☑ No			gramment in the latest three to consider an accompany to the consideration of the latest in the latest in the consideration in the consideration of the latest in the latest in the consideration in t		mort. y
	Yes. 0	Give specific	information			\$
						5
33.		_	-	not you have filed a lawsuit or made a demand s, insurance claims, or rights to sue		
	☐ Yes. □	Describe eac	h claim			
						\$
34.	Other conto set off		l unliquidated clain	ns of every nature, including counterclaims of th	-	
	Yes. D	Describe eac	h claim	All Control (Control	و المراقب و المر	and the same of th
			· · · · · · · · · · · · · · · · · · ·		rast i manurus rasta onamu i rasta i onamu o onami faranta anta onamu o onamu a santa anta anta anta onamu o o	\$
	No Yes. C	Give specific	you did not already] s
36.				s from Part 4, including any entries for pages yo		\$ 0.00
		· · · · · · · · · · · · · · · · · · ·			**************************************	
		. .	• 5			
W.	rt 5: [Jescribe	Any business-i	Related Property You Own or Have an	i interest in. List any r	eal estate in Part 1.
37.	Do you ov	vn or have a	ıny legal or equitab	le interest in any business-related property?		
	🗷 No. Go	o to Part 6.				
	☐ Yes. G	o to line 38.				e autoria.
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts	receivable	or commissions yo	u already earned		
	☑ No					,
	Yes. D	escribe				_
		į.	d Artificings' sylving designary designing for the first story and described throughout continuous to the Second ray disjust	ter merket his hall and an entre a service here a state an execute merce manage his his his his his met met met met sa decent are his access that a transmission of common men and a met	et to protect to the second common soon with an accept the terminance because our acceptance because our bids a	\$
		-	nishings, and supp			
	•	dusiness-relati	ed computers, software	, modems, printers, copiers, fax machines, rugs, telephone	s, desks, chairs, electronic devices	
	No No	oo orib - T			dinya dikini mban badi seke embanyani embanya biriku esiken esiken esonon ene edakana olikiki esano amana minimi sah	
	⊶ Yes. D	escribe				\$
			and the state of t			

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Debtor 1		a K. Harris Case numbe	f (if known)	
	First Name	Middle Name Last Name		
0. Machine	ery, fixtures, e	quipment, supplies you use in business, and tools of your trade		
☑ No				
Yes.	Describe			S
			والرواء والمراجع والمسترسان والمسترسان وسواره والمتراد والمراد والمراجع والم	Any and any any and any any and any any and any and any and any and an
1. Inventor	ry			
₩ No	Describe			
L 165.	Describe			,
	i e			
2. Interests	s in partnersh	ips or joint ventures		
MO No				
Yes.	Describe	Name of entity:	% of ownership:	
			%	\$
			%	\$
			%	\$
	er lists, mailin	g lists, or other compilations		
₩ No			4.4.1.5	
		include personally identifiable information (as defined in 11 U.S.C. § 101(4	1A))?	
	□ No			***************************************
	Yes. Desc	nbe		\$
4. Any bus	iness-related	property you did not already list		
₩ No				
	Give specific			\$
intori	mation			\$
			···	
				\$
				\$
				\$
				\$
		of all of your entries from Part 5, including any entries for pages you have		\$
tor Part	5. Write that n	number here	······································	
				•
Nami Sala				١.
Part 6:	If you own or	ny Farm- and Commercial Fishing-Related Property You Own or F have an interest in farmland, list it in Part 1.	lave an Interest I	ın.
	.,,			
6 Do you d	own or have a	ny legal or equitable interest in any farm- or commercial fishing-related pr	operty?	
	Go to Part 7.	, , , , , , , , , , , , , , , , , , , ,		
	Go to line 47.			the state of the state of the state of
				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
7. Farm an	imals			•
Example	s: Livestock, p	oultry, farm-raised fish		
No No				
☐ Yes			an and hand and continued and analysis for transport and a last contribution of the continued to the second contribution of the contribution of th	**************************************
				•
	1			Ψ

Case 16-01909 Doc 1 Filed 01/22/16 Entered 01/22/16 10:17:39 Desc Main Document Page 18 of 94 Khaneidga K. Harris Case number (if known) Debtor 1 Last Name 48. Crops-either growing or harvested ☐ No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 2 No Yes, Give specific information...... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 2.400.00 56. Part 2: Total vehicles, line 5 3,300.00 57. Part 3: Total personal and household items, line 15 0.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 3,300.00 Copy personal property total → 3,300.00

3,300.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

62. Total personal property. Add lines 56 through 61.

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F	ill in this infor	nation to identify your case:					
D	COCO: +	aneidga Ka-aqua Harris					
	ebtor 2	Name Middle Name	Last Name				
	Spouse, if filing) First Inited States Bank	Name Middle Name truptcy Court for the: Northern Distr	Last Name				
С	ase number if known)						Check if this is an imended filing
\bigcirc	fficial Fo	m 106C					
		le C: The Pro	perty You	Claim	as Exemp	ot	12/15
Usi spa	ng the property ice is needed, f	d accurate as possible. If two mayou listed on <i>Schedule A/B: Pro</i> Il out and attach to this page as the number (if known).	perty (Official Form 106	A/B) as your sou	rce, list the property tha	at you claim as exemp	t. If more
spe of a reti limi	ecific dollar am any applicable rement funds- its the exempt	property you claim as exempt, count as exempt. Alternatively, statutory limit. Some exemptionary be unlimited in dollar amount to a particular dollar amount to a particular dollar amount to the applicable statutory amount	, you may claim the ful ons—such as those fo nount. However, if you nt and the value of the	ll fair market val r health aids, rig claim an exemp	ue of the property bei hts to receive certain otion of 100% of fair m	ng exempted up to	he amount cempt law that
P	art 1: Iden	tify the Property You Clain	n as Exempt				
1.	☑ You are c	exemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11 L	ikruptcy exemptions. 11	-			
2.	For any prop	erty you list on Schedule A/B t	that you claim as exem	pt, fill in the info	ormation below.		
		tion of the property and line on 3 that lists this property	Current value of the portion you own Copy the value from Schedule A/B		exemption you claim	Specific laws that	allow exemption
	Brief description: Line from Schedule A/B	Personal wearing and	als 300.00		ir market value, up to able statutory limit	735140	5 S/12-1001
	Brief description: Line from Schedule A/B	Personal furniture	\$ 1500.00		ir market value, up to	135 ILCS	5/12-120100
	Brief description: Line from Schedule A/B	Personal Geotronics	\$ 1300.00		ir market value, up to able statutory limit	735ILCS	1 110-1201asch
3.	-	ning a homestead exemption of ustment on 4/01/16 and every 3			r the date of adjustmen	t.)	

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Debtor 1

Khaneidga Ka-aqua Harris

Case number (if known)_

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	<u></u> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	Control of the Contro
Brief description:	\$	<u>_</u> \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	S	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief	\$	3 \$	
description:	· · · · · · · · · · · · · · · · · · ·	100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
			No. 1
Brief description:	\$	u s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Bare			
Brief description:	\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief	œ.	 \$	
description:	Φ	100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief			
description:	\$	Q \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B:		* * * * * * * * * * * * * * * * * * *	
Brief	¢		
description:	*	100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	

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Debtor 1	Khaneidga Ka	a-aqua Harris	
Debior 1	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	r the: Northern District of I	linois
			İ

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any creditors have claims secured by your property?
	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	 Statutory lien (such as tax lien, mechanic's lien) 			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number		iki sinesistetimisis Kalesia (14 gasa proprincia senerii ee kasiisi seesiisi seesiisi seesiisi seesiisi seesii	on particular description of the second states of t
2				
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
	Describe the property that secures the claim:	\$		\$
Creditor's Name Number Street			\$	\$
	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent		\$	\$
	As of the date you file, the claim is: Check all that apply.		\$	\$
	As of the date you file, the claim is: Check all that apply.		\$	\$
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		\$	\$
Number Street City State ZIP Code Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)		\$	\$
Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)		\$	\$
Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$	\$
Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)		\$	\$
Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$	\$

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Debtor 1

	Document Page 2	22 of 94
Khaneidga Ka-aqua Harris		Case number (if known)
First Name Middle Name Last Name		
Additional Page		Column A Column B Column C Amount of claim Value of collateral Unsecure
After liating any antrice on this page any	nhar tham baginging with 2.2 fc	

Additional Page Part 1: After listing any entries on this page by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	that supports this	portion
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	Amount of claim Do not deduct the value of collateral. Surports this value of collateral that supports this value of collateral. 5			
	As of the date you file, the claim is: Check all that apply.	•		
	☐ Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	• -			
At least one of the debtors and another	*			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Libra midensi (turki pilaja) propintula kalendra permanya mendenen pinda (tirki dituktuktu turki pinda pinda p	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
Tarrette and a sect	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply			
Debtor 1 only				
Debtor 2 only				-
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number	unta Kalanta (Kalanta (Kalant	alling Klamajards selection for the field of	orezona banco 1938 eroporezonak i felikabila pribationi hanistan
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien, Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured	•		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only				
At least one of the debtors and another				
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	in Column A on this page. Write that number here:	\$		
	add the dollar value totals from all pages.			
Write that number here:		5		

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neck if this is an
nended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

ne an	eded, copy the Part you need, fill it out, number i y additional pages, write your name and case nu	mber (if known).	idation rage to	ins page.	on the top of
Pa	art 1: List All of Your PRIORITY Unsecure	ed Claims			
1.	Do any creditors have priority unsecured claims	s against you?			
	No. Go to Part 2.				
	Yes.				
2.	each claim listed, identify what type of claim it is. If	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's har Part 1. If more than one creditor holds a particular claim, potructions for this form in the instruction booklet.	at claim here and ame. If you have	show both more than t	priority and two priority
• •	(For an explanation of each type of claim, see the i	issuctions for this form in the distriction booker.)	Total claim	Priority amount	Nonpriority amount
2.1		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply			
	City State ZIP Code	Contingent			
	Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	Yes				
2.2		Last 4 digits of account number	S	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply			
	WANTED THE TOTAL CONTROL OF THE TOTAL CONTROL OT THE TOTAL CONTROL OF TH	Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only				
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	□ No □ Yes				

Last Name

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Debtor 1

Khaneidga Ka-aqua Harris First Name Middle Name

Document Page 24 Qf 94 number (if known)

Part 1:	Your PRIORITY	Unsecured	l Claims	Continuation	Page

noming any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprio amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$. \$
	When was the debt incurred?			
Number Street	As of the date on the the date to Object with the coll			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
□ No				
☐ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
danier Greet	As of the date you file, the claim is: Check all that apply.			
,	_			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	Lispated			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
	Other. Specify			
s the claim subject to offset?				
☐ No ☐ Yes				
terministration and the engineering in incompression between the engineering the state of the engineering of	им выводить на модилент не почет не достой не не предмет не не предмет не	recommend conservation and the conservation of	to work or strains to surface to believe the surface of	secundence de contracto de cont
riority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	When was the debt incurred?			
lumber Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	200800 844420-0194 (AMERICA) 20-420-415000 (AE-6020) 33-2154-01400	NORTH THE PROPERTY OF THE PROP	95x4456453645460936545644646666690
s the claim subject to offset?				
No				
TYes				

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Khaneidga Ka-aqua Harris

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Part 2:	List All of You	r NONPRIORITY	Unsecured	Claims

	Do any creditors have nonpriority un ☐ No. You have nothing to report in th ☐ Yes	is part. Sub	mit this form to the	court with your other schedules.	e va sarang ka na na manggara a		ing a state of the state of
4.	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one creclaims fill out the Continuation Page of	l claims in ditor separa ditor holds a	the alphabetical o	order of the creditor who holds of the creditor who had the creditor who	each claim. If a creditor has lat type of claim it is. Do not	more th	ns aiready unsecured
1.1	JB Robinson			Last 4 digits of account number	. 3 6 6 2		As Januari Dankada harabida biyinca da
	Nonpriority Creditor's Name			-	07/01/2012	\$	916.00
	375 Ghent Rd			When was the debt incurred?	0770 1720 122		
	Fairlawn City	OH State	44333 ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	Oily	State	4.11 Oode	☐ Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	☑ Debtor 1 only			☐ Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	urad claim:		
	At least one of the debtors and another			Student loans	area ciaim.		
	☐ Check if this claim is for a commu			Obligations arising out of a sepa	ration agreement or divorce		
	Is the claim subject to offset?	inty debt		that you did not report as priority Debts to pension or profit-sharing	claims		
	✓ No			Other. Specify	g plans, and other similar debts		
	Yes			, , , , , , , , , , , , , , , , , , , ,			
.2	Jareds Jewelers Nonpriority Creditor's Name	ર ટેલ્કેટન્સ હાલ્ય કરિયાનો કરિય	naguna ter dissembaki kapungidaren meleririnan, international diselakan diselakan diselakan diselakan diselakan	Last 4 digits of account number When was the debt incurred?	$\frac{3}{07/01/2012}$	\$	3,649.00
	375 Ghent rd						
	Number Street		44000	As of the date you file, the claim	ie. Chack all that anniv		
	Fairlawn City	OH State	44333 ZIP Code		is. Oneck an trat appry.		
	Who incurred the debt? Check one.			☐ Contingent☐ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only			Town of MONDDIODITY	d alains		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ired claim:		
	At least one of the debtors and another			Student loans Obligations arising out of a separations.	ration agreement or divorce		
	Check if this claim is for a commun	nity debt		that you did not report as priority	claims		;
	ls the claim subject to offset?			Debts to pension or profit-sharing Other. Specify	g plans, and other similar debts		:
	✓ No				*		
.3	MFG Financial INC/ Light hous	se financi	al	Last 4 digits of account number	<u>4 7 3 6</u>	en e	1,649.00
	Nonpriority Creditor's Name PO Box 526262			When was the debt incurred?	10/01/2014	Ψ	
	Number Street				,		
	Salt lake City	UT	84152 ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only Debtor 2 only			☐ Disputed			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			Student loans			
	Check if this claim is for a commun	nity debt		Obligations arising out of a separ			į
	Is the claim subject to offset?			that you did not report as priority Debts to pension or profit-sharing			
	✓ No ☐ Yes			Other. Specify	= 1		
				and the state of the			gyanning are announced property or committees are consisted to

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Debtor 1

Khaneidga Ka-aqua Harris Last Name First Name

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Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this page,			n in Statistics of the Statistical Control of Statistics of the Statistics of the Statistics of the Statistics	
National Credit Adjusters/J/	ARED		Last 4 digits of account number 3 6 9 3	\$ <u>3,64</u>
Nonpriority Creditor's Name 327 W 4th ave			When was the debt incurred? 09/02/2013	
Number Street Hutchinson	KS	67501	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and ano	ther		 Student loans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a com	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
2 No □ V				
Yes	anna a section tax a securità se sa international à la little de l'Alle de l'Alle de l'Alle de l'Alle de l'Alle	gy, gypgystales (seens samin) a thion the shift distributed of the shift of the shi	TOWN AND INCIDENCE OF THE PROPERTY OF THE PROP	11. A. 11. A.
TURNER ACCEPTANCE O	RP		Last 4 digits of account number 1 5 1 1	\$ 17,26
Nonpriority Creditor's Name			When was the debt incurred? 04/15/2014	
5900 W HOWARD ST Number Street			As of the date you file, the claim is: Check all that apply.	
Skokie City	IL State	60077 ZIP Code	Contingent	
•			Unliquidated	
Who incurred the debt? Check one. Debtor 1 only			☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	thar		Student loans	
At least one of the debtors and ano			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a com	munity debt		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset? No			Other. Specify	
MAINO Yes				
nerales have appeared and a comparate electrical and control of the control of th	galytinizana reesa aras spenera 45 mm 970 9000	estante proprieta estant filmen perme acceste e de similar de estantrolas Colombias de Aresto.	Last 4 digits of account number $0 5 3 8$	s43
Worlds finance Corp Nonpriority Creditor's Name				
4313 w 211th st				
Number Street matteson	IL	60443	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one			☐ Unliquidated ☐ Disputed	
Debtor 1 only			•	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and ano	ther		 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a com	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	-		Other. Specify	
☑ No			-	

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Debtor 1

Khaneidga Ka-aqua Harris First Name Middle Name Last Name Document

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	4-12-00-00-00-00-00-00-00-00-00-00-00-00-00	On which entry in Part For Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Clain
		Last 4 digits of account number
City google submit passivenup passenua is indicated and subvisible cut temperature it in the citizen et	State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims — Claims
City	State ZIP Code	Last 4 digits of account number
g kalajangan kaptangan Agabangan Agabangan Agaman kanan k	rzywyd przykata populiwo wież oświet si dowiet si O w się dowiet si dowiet	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
<mark>City</mark> 	State ZIP Code	
Vame		On which entry in Part 1 or Part 2 did you list the original creditor?
··-		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City consideration in the consideration of the consideration of the constant o	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
(Value		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		-
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
Management of the second of th		·
City	State ZIP Code	- Last 4 digits of account number

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Debtor 1

Khaneidga Ka-aqua Harris Middle Name

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the a	amou mou	unts of certain types of unsecured claims. This informations for each type of unsecured claim.	ition i	s for statistical reporting purposes only. 28 U.S.C. § 159.
				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
		Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e.	Total. Add lines 6a through 6d.	6e.	\$
				Total claim
Total claims	6f.	Student loans	6f.	\$
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6 i.	+ \$
	6j. `	Total. Add lines 6f through 6i.	6j.	\$

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Fill in this in	nformation to id	entify your case:		
Debtor 1	Khaneidga K	a-aqua Harris		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	or the: Northern District of Illin	ois	
Case number (if known)			***************************************	

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

1.	Do any creditors have priority unsecured claim	s against you?			
	No. Go to Part 2.				
	Yes.				
	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the	reditor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's national for the creditor holds a particular claim appropriate for this form in the instruction booklet.)	at claim here ar ame. If you hav	nd show both e more than to	priority and wo priority
* (1011)	(For all explanation of each type of claim, see the i	instructions for this form in the instruction bookier.)	Total claim	Priority	Nonpriority
			i Otal Cialili	amount	amount
2.1					
2.1		Last 4 digits of account number	\$	\$	_ \$
	Priority Creditor's Name	1611			
	Number Street	When was the debt incurred?			
	Number Street	A - 5 th - data 525 the about to Charles to Charles			
		As of the date you file, the claim is: Check all that apply			
	City State ZIP Code	Contingent			
	Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury while you were			
	Is the claim subject to offset?	intoxicated			
	No	Other. Specify			
	Yes				
2.2		Last 4 digits of account number		aucusa erakan diwan kisi dikili ketikaliki d	
	Priority Creditor's Name		\$	_ \$	\$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply			
			•		
	City State ZIP Code	☐ Contingent☐ Unliquidated			
	2.00	Disputed			
	Who incurred the debt? Check one.	□ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	□ No				
	□ vac				

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Debtor 1

Khaneidga Ka-aqua Harris
First Name Middle Name Last Name

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Part 1:	Your PRIORITY	Unsecured Claims -	 Continuation Page

Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
PROTES CIEBLES STATE	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZiP Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify			
s the claim subject to offset?	• • • • • • • • • • • • • • • • • • • •			
□ No				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Filonity Creditor's Name	When was the debt incurred?			
Number Street	When was the destinounced:			
	As of the date you file, the claim is: Check all that apply.		÷	
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?	· ·			
No				
Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	Applicação de describer de describer de la companión de la com	zwezwonenewszanowowenewokonewski kili kili	Conf. in Control assessing Control Const.
is the claim subject to offset?				
is the claim subject to onset:				

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Debtor 1

Khaneidga Ka-aqua Harris

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		:

List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1, If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Credence Resource Management/ (AT&T) Last 4 digits of account number 9 1 0 1 1,146.00 Nonpriority Creditor's Name 07/01/2015 When was the debt incurred? 17000 Dallas Prwy ste Number Street Dallas Tx 75248 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another □ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts V No Other. Specify_ ☐ Yes 218.00 Credit Management/ WOW schaumburg Last 4 digits of account number 11/01/2011 When was the debt incurred? Nonpriority Creditor's Name 4200 International PKWY Number As of the date you file, the claim is: Check all that apply. 75007 Carrollton TX State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify_ 🗹 No ☐ Yes Enhanced Recovery Corporation/ Sprint Last 4 digits of account number 1 2 4 1 1,168.00 Nonpriority Creditor's Name 06/01/2014 When was the debt incurred? PO box 57547 Number Street **JACKSONVILLE** FL 32241 As of the date you file, the claim is: Check all that apply. ZIP Code State Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts M No Other, Specify ☐ Yes

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Debtor 1

Khaneidga Ka-aqua Harris

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First Name Middle Name

Last Name

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Your NONPRIORITY Unsecured Claims — Continuation Page

ENHANCED RECOVER	Y CORP/ T-N	MOBILE	Last 4 digits of account number 8 6 2 2	\$ <u>233</u>		
PO BOX 57547			When was the debt incurred? 12/01/2013			
Number Street JACKSONVILLE	FL	32241	As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a cost the claim subject to offset? No Yes	State one. another	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
ENHANCED RECOVER	Y CORP/ TM		Last 4 digits of account number 2 8 7 4 When was the debt incurred? 01/01/2014	\$ <u>233</u>		
PO BOX 57547			When was the debt incurred? 01/01/2014			
Number Street JACKSONVILLE	FL	32241	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	☐ Contingent☐ Unliquidated			
Who incurred the debt? Check ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and ☐ Check if this claim is for a claim subject to offset? ☐ No ☐ Yes	another		□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify			
HONOR FINANCE	DANNING METALINIS ORIS ESTIMICINES ANNO METALINIS À RANCON ESTIMICÀ À RANCON ESTIMICA À RANCON ESTIMIC	gadyshiganyshiqaasaksa-kiin-kiinsaiistaaksaksiiskeetek Ekkistetti saksiikk	Last 4 digits of account number <u>0</u> <u>3</u> <u>5</u> <u>1</u>	_{\$} 10,58		
Nonpriority Creditor's Name 1731 CENTRAL ST			When was the debt incurred? 01/01/2014			
Number Street EVANSTON	IL	60201	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	— ☐ Contingent ☐ Unliquidated			
Who incurred the debt? Check	one.		☐ Disputed			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify			

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Debtor 1

Khaneidga Ka-aqua Harris First Name Middle Name

Part 3:

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check and): Rept to Creditors with Priority Unconvered Claims
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	to the standard to the standar			• •
City		State	ZiP Code	Last 4 digits of account number
and the second second				On which entry in Part 1 or Part 2 did you list the original creditor?
lame	· ·	• •	· · · · · · · · · · · · · · · · · · ·	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
		 		Claims
City		State	ZIP Code	Last 4 digits of account number
tra al-100 mai participi ne far				On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
ity		State State	ZIP Code	Last 4 digits of account number
			·····	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street	· · · · · · · · · · · · · · · · · · ·	····	Part 2: Creditors with Nonpriority Unsecured
· · · ·			· · · · ·	Claims
City		State	ZIP Code	Last 4 digits of account number
			00000000000000000000000000000000000000	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
lumber	Street		<u> </u>	☐ Part 2: Creditors with Nonpriority Unsecured
· · · · · · · · · · · · · · · · · · ·				Claims
ity		State	ZIP Code	Last 4 digits of account number
		A see military from the contract of the contra		On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street	* 0	<u> </u>	☐ Part 2: Creditors with Nonpriority Unsecured
	****			Claims
City		State	ZIP Code	Last 4 digits of account number
lame		Commission and Commission Annual Property and Commission Annua		On which entry in Part 1 or Part 2 did you list the original creditor?
ane				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
ity	·	State	ZIP Code	Last 4 digits of account number

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Debtor 1

Khaneidga Ka-aqua Harris Middle Name

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Part	4

Add the Amounts for Each Type of Unsecured Claim

6. Total the a	amounts of certain types of unsecured claims. This inform mounts for each type of unsecured claim.	nation is for statistical reporting purposes only. 28 U.S.C. § 159.
		Total claim
Total claims	6a. Domestic support obligations	6a.
from Part 1	6b. Taxes and certain other debts you owe the government	6b. \$
	6c. Claims for death or personal injury while you were intoxicated	6c.
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + _{\$}
	6e. Total. Add lines 6a through 6d.	6e. \$
		Total claim
Total claims	6f. Student loans	6f. \$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _{\$}
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$
	6j. Total. Add lines 6f through 6i.	6j. \$

-					ACHTOCOLS			
13	ll in this in	nformation to identify y	our case:					
De	ebtor 1	Khaneidga Ka-aqua	a Harris					
		First Name	Middle Name	Last Name				
	ebtor 2 couse, if filing)	First Name	Middle Name	Last Name	-			
Ur	nited States	Bankruptcy Court for the: N	lorthern District o	f Illinois			_	
Ca	ase number							k if this is an ided filing
	known)						amen	idea iiiiig
Of	fficial F	Form 106E/F						
S	ched	ule E/F: Cre	ditors W	ho Have Unse	ecured Claim	S		12/15
List A/B cred nee any	the other t: Property ditors with ded, copy additiona	party to any executory (Official Form 106A/B) partially secured clain the Part you need, fill Il pages, write your nan	or contracts or un and on Scheduns that are listed it out, number the and case nur		result in a claim. Also list and Unexpired Leases (Of Who Have Claims Secured	executory cor ficial Form 100 <i>f by Property</i> .	itracts on Sc SG). Do not i If more spac	nedule nclude any e is
0.00000000		st All of Your PRIOR						
2.	Yes. List all of each claim nonpriority unsecured	your priority unsecure n listed, identify what type amounts. As much as p I claims, fill out the Contin	d claims. If a cre e of claim it is. If a ossible, list the c nuation Page of F	editor has more than one prior a claim has both priority and r laims in alphabetical order ac Part 1. If more than one credit astructions for this form in the	nonpriority amounts, list that cording to the creditor's nar for holds a particular claim, l	claim here and ne. If you have	I show both p more than tw	nionty and ropiority t 3. Nonpriority
2.1				I and A state of an amount were	b		\$	\$
	Priority Cre	ditor's Name	······································	Last 4 digits of account nu	•			
	Number	Street		When was the debt incurred	d?			
				As of the date you file, the	claim is: Check all that apply			
	City	State	ZIP Code	Contingent				
	•			Unliquidated				
	Debto	urred the debt? Check one	€.	☐ Disputed				
	Debto	•		Type of PRIORITY unsecu	ıred claim:			
		r 1 and Debtor 2 only		Domestic support obligatio				
	At leas	st one of the debtors and an	other	Taxes and certain other de				
	Chec	k if this claim is for a co	mmunity debt	Claims for death or person	al injury while you were			
	is the cla	aim subject to offset?		intoxicated				
	☐ No			Other, Specify				
	∟ Yes	angananaka waisan sakakan saki ka masaya ya Shiriya wa masaya wa Sainia da Calibada i Nasaya wa	grangen versomskritiset Sutterfiset Sutterfiset viteriorite i viteriorita i viteriorite i viteriorita i viteriorita i viteriorita i viteriorita i viteriorita i viteriorit	eg occurrent <mark>samintel i estilat i et tilatelet i</mark> Ostal iller famine occurrent ellefallet ett i ett	ny fanjara prominina kataminina dia manina dia 3,000 pertangana kamingkah kamina di katawa ketahun da dalah di Manjara permanangan kantangan dan dan dan dan dan dan dan dan dan d	tini k mala di salam dadi dasim dan sayan yang garang yang garang dan sayan sayan sayan sayan sayan sayan saya		the manage commendate Control National Open Property of Street Control of Street Con
2.2	Priority Cra	ditor's Name		Last 4 digits of account nu	mber		\$	_ \$
	Thomas oro	and o , tarrio	-	When was the debt incurre	d?			
	Number	Street		As of the date you file, the	claim is: Check all that apply			
				☐ Contingent	,,,			
	City	State	ZIP Code	Unliquidated				
	•	urred the debt? Check on		☐ Disputed				
	Debto			Type of PRIORITY unsecu	ired claim:			
	Debto	•		Domestic support obligation				
	Debto	or 1 and Debtor 2 only		Taxes and certain other de				
	At lea	st one of the debtors and an	other	Claims for death or person				
		k if this claim is for a co	mmunity debt	intoxicated	and injury from a journal			
	Is the cla	aim subject to offset?		Other, Specify				
	- I - I - I - I - I - I - I - I - I - I				property of the commence of the property of the commence of th		and the second section of the contract of the	

Debtor 1

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Khaneidga Ka-aqua Harris

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Part 1: Your PRIORITY Unsecured Claims - Continuation Page

Priority Circletter's Name	fter listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
As of the date you file, the claim is: Check all that apply. Contingent Undiquidated Undi	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Contingent Uniquidated Disputed	Number Street	When was the debt incurred?			
City State ZiP Cose Disputed		As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one. Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 only Debtor 3 and Debtor 3 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 3 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 1 only D		☐ Contingent	·		
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Demestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specif	City State ZIP Code				
Debtor 2 only	Who incurred the debt? Check one.	Ulsputed			
chetor 1 and Debtor 2 only		Type of PRIORITY unsecured claim:			
At least one of the debtors and another Claims for death or personal injury while you were intoxicated intoxicated Check if this claim is for a community debt Check if this claim subject to offset?					
Check if this claim is for a community debt		Taxes and certain other debts you owe the government			
Is the claim subject to offset? No Yes		intoxicated			
No		☐ Other, Specify			
Number Street Street As of the date you file, the claim is: Check all that apply Confingent Unliquidated Disputed	□ No				
Number Street Street As of the date you file, the claim is: Check all that apply Confingent Unliquidated Disputed	TO COMPANIES AND ARTHUR AREA AND A THE ARTHUR CONTEMPLATIONS AND AREA AND A	rest (or section as the manufacture or section) described described manufacture subject to secure as substitutive statement on the manufacture place or manu		Confermation pressures establishment descriptions for	EAR CEIRCE CONTRACTOR ACT CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR O
As of the date you file, the claim is: Check all that apply. Contingent	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
City State ZiP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Demestic support obligations Taxes and certain other death or personal injury while you were intoxicated Other. Specify Debtor 1 only Yes Last 4 digits of account number Size S S S City State ZiP Code Debtor 1 only Demestic support obligations Taxes and certain other death or personal injury while you were intoxicated Other. Specify State ZiP Code Disputed Disputed Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 accommunity debt Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Disputed Disputed Disputed Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Detects 2 only Demestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Demestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Demestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Spec	Number Street	When was the debt incurred?			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Demostic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number Sireet As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		☐ Contingent			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	City State ZIP Code				
Debtor 1 only Debtor 2 only Domestic support obligations Taxes and certain other debts you owe the government Claims for a community debt Domestic support obligations Taxes and certain other debts you were intoxicated Other. Specify Domestic support obligations Taxes and certain other debts you were intoxicated Other. Specify Other. Spec	Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply. City State Zip Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?		Type of PRIORITY unsecured claim:			
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Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal i	Debtor 1 and Debtor 2 only				
Sthe claim subject to offset? No		Claims for death or personal injury while you were			
No Yes No Yes	☐ Check if this claim is for a community debt				
Last 4 digits of account number \$\$\$	Is the claim subject to offset?				
Last 4 digits of account number\$\$\$ Number					
When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Is the claim subject to offset?		earth-resistation (Control of the Control of the Co	TELEBOOK ORDERE SOO DESERVO DE CENTRO DA REPUBBINO DESERVO DESERVO DE CENTRO DE CENTRO DE CENTRO DE CENTRO DE	actions are used a strong in particularly are single distri-	10 MOS. MO K 074 0 MOSS 1 CAMES 41/40050003
As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Number Steet	When was the debt incurred?			
Contingent City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?		As of the date you file, the claim is: Check all that apply.			
City State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. □ Debtor 1 only Type of PRIORITY unsecured claim: □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ State ZIP Code Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Is the claim subject to offset?					
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	City State ZIP Code	Unliquidated			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?	Who incurred the debt? Check one.	☐ Disputed			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify	Debtor 1 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Specify ☐ Other. Specify ☐ Check if this claim subject to offset? ☐ Check if this claim subject to offset? ☐ Check if this claim subject to offset? ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ Other. Specify ☐ Other. Specify	<u> </u>				
Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?					
Is the claim subject to offset?		Claims for death or personal injury while you were	1000c12051646066554224144444444		and the second s
	GHECK IT THIS CIAIM IS FOR a community debt			menune e arte intri e economia di diddita de intrigilia da información de intrigilia de información de informac	
□ Yes	□ No				

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Khaneidga Ka-aqua Harris

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Middle Name

List All of Your NONPRIORITY Unsecured Claims

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more the claims fill out the Continuation Page of Part 2. Accounts Receivable Mana Nonpriority Creditor's Name 2950 W Chicago Number Street Chicago IL 60622 City State ZIP Code As of the date you file, the claim is: Check all that Continuated Contingent Unliquidated	and the second s				
Nonpriority Creditor's Name 2950 W Chicago Number Street Chicago IL 60622 City State ZIP Code When was the debt incurred? 09/01/2011 As of the date you file, the claim is: Check all that	it is. Do not list claims already				
Nonpriority Creditor's Name 2950 W Chicago Number Street Chicago IL 60622 City State ZIP Code When was the debt incurred? 09/01/2011 As of the date you file, the claim is: Check all that	Total claim				
2950 W Chicago Number Street Chicago IL 60622 City State ZIP Code As of the date you file, the claim is: Check all that	4 s 476.00				
Chicago IL 60622 City State ZiP Code As of the date you file, the claim is: Check all that ☐ Contingent					
☐ Contingent	t apply.				
Who incurred the debt? Check one. Unliquidated ☐ Debtor 1 only ☐ Disputed					
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Type of NONPRIORITY unsecured claim: Student loans					
□ Check if this claim is for a community debt Is the claim subject to offset? □ No Obligations arising out of a separation agreement of that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other □ Other. Specify	similar debts				
□ No □ Yes					
AES/ESA Nonpriority Creditor's Name PO BOX 61047 Last 4 digits of account number 7 P A 05/01/2009 When was the debt incurred?	0 \$ 4,617.00				
Number Street HARRISBURG, PA 17106 As of the date you file, the claim is: Check all that	t apply.				
City State ZiP Code ☐ Contingent Who incurred the debt? Check one. ☐ Unliquidated ☐ Disputed					
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement of the debtors are considered.	or divorce				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Debts to pension or profit-sharing plans, and other ☐ Other. Specify ☐ Yes	r similar debts				
ASE/ESA Last 4 digits of account number 7 P A Nonpriority Creditor's Name When was the debt incurred? 05/01/2009					
PO BOX 61047 Number Street HARRISBURG, PA 17106 As of the date you file, the claim is: Check all that	t anniv				
City State ZIP Code Who incurred the debt? Check one. □ Contingent □ Unliquidated □ Disputed	, ч рру,				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Student loans					
Check if this claim is for a community debt Obligations arising out of a separation agreement that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				

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Your NONPRIORITY Unsecured Claims — Continuation Page

ASE/ESA	Last 4 digits of account number 7 P A 0 s 3,500.00
Nonpriority Creditor's Name	When was the debt incurred? 05/01/2009
PO BOX 61047 Number Street	A COLUMN THE About in Charles II that capture
HARRISBURG, PA 17106	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	Contingent Unliquidated
Who incurred the debt? Check one.	Disputed
Debtor 1 only	'
Debtor 2 only	Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Student loans
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset?	Other Specify
□ No	
Yes	
A CELES A	Last 4 digits of account number 7 P A 0 \$ 4,000.0
ASE/ESA Nonpriority Creditor's Name	When was the debt incurred? 05/01/2009
PO BOX 61047	when was the debt incurred:
Number Street HARRISBURG PA 17106	As of the date you file, the claim is: Check all that apply.
HARRISBURG, PA 17106 City State ZIP Code	Contingent
	Unliquidated
Who incurred the debt? Check one.	☐ Disputed
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	☐ Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
Is the claim subject to offset?	Other. Specify
☑ No	• -
Yes	
	Last 4 digits of account number 3 0 5 4
Convergent outsourcing (ComCaST) Nonpriority Creditor's Name	When was the debt incurred? 12/01/2014
800 SW 39th st	when was the dept incurred the same and
Number Street	As of the date you file, the claim is: Check all that apply.
Renton VVA 98037 City State ZIP Code	Contingent
·	Unliquidated
Who incurred the debt? Check one.	☐ Disputed
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
Check it this claim is tot a community dept	Lie Debis to pension of pront-snamy mans, and other similar doors
Is the claim subject to offset?	Other Specify

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	**************************************	Addressed to the second
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	t	☐ Part 2: Creditors with Nonpriority Unsecured Clair
		Last 4 digits of account number
City	State ZIP Co	de
The Bright of Designation of the State of th	the Control of the Co	On which entry in Part 1 or Part 2 did you list the original creditor?
Vame		FI D. L. O. Liller with District Uncommend Claims
Number Stree		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Stree	i.	Claims
		A A M. M. C.
City	State ZIP Co	Last 4 digits of account number
\$\times \text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex	Kanada	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		— Characteristic Common
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Number Stree		Claims
City	State ZIP Co	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	at the same of the	Part 2: Creditors with Nonpriority Unsecured
		Claims
		Last 4 digits of account number
City	State ZIP Co	
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	±1	Part 2: Creditors with Nonpriority Unsecured
		Claims
		Last 4 digits of account number
City	State ZIP Co	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
registra		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	et	Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Co	Last 4 digits of account number
arinesia en enementaria en en en en entre en en	ar punance redaktivud of od til king og ek til kenne verkland hann servir militad deletismat er kenne redaktivat se normalis er kenne deletismat er kenne servir med e	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Stree		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree		Part 2: Creditors with Nonpriority Unsecured Claims
		MANION MA
	State 7IP C	Last 4 digits of account number

ZIP Code

State

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Debtor 1

Khaneidga Ka-aqua Harris Middle Name

Last Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	. Domestic support obligations	6a.	\$0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$0.00
	6с	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	† \$
	6e	. Total. Add lines 6a through 6d.	6e.	\$
				Total claim
∰ggadana h	6f.	Student loans	6f.	Total claim
Total claims from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	The second of th
* * ****	6g	Obligations arising out of a separation agreement or divorce that you did not report as priority	•	\$
* * ****	6g 6h	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$

Case 16-01909 Doc 1 Filed 01/22/16 Entered 01/22/16 10:17:39 Desc Main Document Page 41 of 94 Fill in this information to identify your case: Khaneidga Kagua Harris Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: _____ District of _ Check if this is an amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent 7IP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify ☐ No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated ZIP Code ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated

No Yes

Is the claim subject to offset?

Other, Specify

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Your PRIORITY Unsecured Claims — Continuation Page Part 1: Nonpriority After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ☐ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other, Specify_ Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number ___ __ __ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ZIP Code State Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other, Specify Is the claim subject to offset? ☐ No Yes Last 4 digits of account number _ Priority Creditor's Name When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other Specify is the claim subject to offset? ☐ No ☐ Yes

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Part 2:

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List All of Your NONPRIORITY Unsecured Claims

Last Name

	Do any creditors have nonpriority unsupplied No. You have nothing to report in this Yes	is part. Sub	omit this form to the		N. 4 & N				
4.	List all of your nonpriority unsecured nonpriority unsecured claim, list the cred	claims in ditor separa litor holds a	the alphabetical o	order of the creditor who holds each claim. If a creditor has. For each claim listed, Identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	more:	than one ims aiready			
·	_				Tota	l claim			
4,1	Consumer Portfolio Services, I	nc		Last 4 digits of account number	_	12,950.00			
	Nonpriority Creditor's Name			When was the debt incurred? 07/11/2005	\$	12,000.00			
	PO Box 57071 Number Street	LILLIWING WITH THE TAXABLE PROPERTY OF TAXABLE	<u> </u>						
	Irvine City	CA State	92619 ZIP Code	As of the date you file, the claim is: Check all that apply.					
	Who incurred the debt? Check one.			Contingent Unliquidated					
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another			☐ Student loans					
	☐ Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset? No			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify					
	Yes			Other: Specify					
1.2	People's Gas	n (Santa 2002) di Perdinaka (Perdinaka (Perdinaka (Perdinaka (Perdinaka (Perdinaka (Perdinaka (Perdinaka (Perd	terior de la companya de la company La companya de la co	Last 4 digits of account number	\$	600.00			
	Nonpriority Creditor's Name			When was the debt incurred? 02/01/2013					
	200 E Randolph St								
	Chicago	IL	60601	As of the date you file, the claim is: Check all that apply.					
	City	State	ZIP Code	Contingent					
	Who incurred the debt? Check one.			Unliquidated Disputed					
	Debtor 1 only Debtor 2 only			Борасов					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another			Student loans					
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		:			
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts					
	₩ No			Other. Specify					
	Yes	uni processi si sussissi sansis siconi	own, rechnism of difficulty we live that of the entire to both this wife of the entire that th	1 + 2 + 2 + 2 + 2 + 2 + 2 + 2 + 2 + 2 +	Nedlan Sandraction Number	. 2014-15-Personal and Association and Associa			
.3	Nicor Gas			Last 4 digits of account number	\$	1,300.00			
	Nonpriority Creditor's Name 19199 Glenwood Rd			When was the debt incurred? 02/08/2010		:			
	Number Street Glenwood	IL	60507	A control of the cont					
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.					
	Who incurred the debt? Check one.			Contingent Unliquidated		:			
	Debtor 1 only			☐ Disputed		:			
	Debtor 2 only Debtor 1 and Debtor 2 only								
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a commun	ity debt		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce					
	Is the claim subject to offset?	-		that you did not report as priority claims					
	No Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify					

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Khaneidga Kaqua Harris

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Your NONPRIORITY Unsecured Claims — Continuation Page

Comed			Last 4 digits of account number	\$ <u>2,40</u>			
Nonpriority Creditor's Name 3500 N California Ave			When was the debt incurred? 05/02/2010				
Number Street Chicago	IL	60618	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Che			Unliquidated				
wno incurred the debt? Cha Debtor 1 only	eck one.		Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only			Student loans				
At least one of the debtors a	and another		Obligations arising out of a separation agreement or divorce	hat			
Check if this claim is for	a community debt		you did not report as priority claims				
s the claim subject to offse	t?		Debts to pension or profit-sharing plans, and other similar del Other. Specify	ots			
⊿ No			WILES OPOGY				
Yes							
City of Chicago Financ	ce	enge yang panagang di disembah di di di digilah sebah di di di digilah sebah di di digilah sebah sebah di di d	Last 4 digits of account number	<u>\$_2,50</u>			
			When was the debt incurred? 05/08/2007				
500 W Monroe St		***************************************	was a second control of the second control o				
Chicago	IL	60661	As of the date you file, the claim is: Check all that apply.				
Sity	State	ZIP Code	Contingent				
Vho incurred the debt? Che	ck one.		Unliquidated				
Debtor 1 only			Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only			Student loans				
At least one of the debtors a	nd another		Obligations arising out of a separation agreement or divorce t	hat			
Check if this claim is for	a community debt		you did not report as priority claims	de.			
s the claim subject to offset	1?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify				
⊿ No							
J Yes	### ### ##############################	224g244_\$4gggy					
ansing Municipal Dep		and the second s	Last 4 digits of account number	s450			
Ionpriority Creditor's Name			When was the debt incurred? 06/02/2015				
3141 Ridge Rd			Vicinity is control of the control o				
ansing	IL	60438	As of the date you file, the claim is: Check all that apply.				
ity	State	ZIP Code	Contingent				
Vho incurred the debt? Chec	ck one.		Unliquidated				
Debtor 1 only			☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only			☐ Student loans				
At least one of the debtors a	nd another		Obligations arising out of a separation agreement or divorce the	nat			
Check if this claim is for a community debt			you did not report as priority claims				
the claim subject to offset	_		 Debts to pension or profit-sharing plans, and other similar deb Other. Specify 	IS			
No			- Outer Opening				
Yes							

Debtor 1

Part 3:

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Khaneidga Kaqua Harris

List Others to Be Notified About a Debt That You Already Listed

	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Clair
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Value	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
tumber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Suedi	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	LAST 4 VIGITS OF ACCOUNT FIGURES.
Manager and the second	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
	Last 4 digits of account number
City State ZIP Code	

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Debtor 1

Khaneidga Kaqua Harris

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Middle Name

Last Name

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Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$
	6e.	Total. Add lines 6a through 6d.	6e.	\$
		•		Total claim
otal claims	6f.	Student loans	6f.	· \$
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$
	6j.	Total. Add lines 6f through 6i.	6j.	\$

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Fill in this i	nformation to id	entify your case:				
Debtor 1		a-aqua Harris				
Deptor	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	j) First Name	Middle Name	Last Name			
United States	Bankruptcy Court fo	or the: Northern District of I	Illinois			☐ Check if this is an
Case number (If known)	·		· · · AD-INIUVER			amended filing
<u> </u>						

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

	eded, copy the Part you need, fill it out, number t y additional pages, write your name and case nui	the entries in the boxes on the leπ. Attach the Continumber (if known).	luation Page to	this page. On the top	, 01
Pa	rt 1: List All of Your PRIORITY Unsecure	ed Claims			
	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the c unsecured claims, fill out the Continuation Page of	editor has more than one priority unsecured claim, list th a claim has both priority and nonpriority amounts, list that claims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim	at claim here and ime. If you have:	show both priority and more than two priority	1 0
	(For an explanation of each type of claim, see the in	nstructions for this form in the instruction bookiet.)	Total claim	Priority Nonpr amount amoun	
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	\$\$	
	Number Street City State ZIP Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			I
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			
2.2	Priority Creditor's Name Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply			and the transfer of the file of the second
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify			

Debtor 1

Part 1:

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Khaneidga Ka-aqua Harris

Your PRIORITY Unsecured Claims - Continuation Page

	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonp amou
Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply			
City State ZiP Code	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	□ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?				
No				
Tyes	allia del distributo de la composição de		NASTAN AND AND AND AND AND AND AND AND AND A	
And Andrews	Last 4 digits of account number	\$	S	\$
nority Creditor's Name				
umber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	_			
ty State ZIP Code	☐ Contingent			
ty State ZIP Code	☐ Unliquidated ☐ Disputed			
/ho incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
	Other. Specify			
the claim subject to offset?				
No	•			
	THE TO THE THE BEST WELL AS THE BEST AS TH	i y i gwys hwweith a gwlaigh a'i thai gall ai gall a g	in a gast des seguestres en 15 com de mesmo merche de montrales de montrales de montrales de montrales de mont	STATE OF THE STATE
	Last 4 digits of account number	\$	\$	\$
ority Creditor's Name			***************************************	
mber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
y State ZIP Code	Unliquidated			
no incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	<u>_</u>			
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	oprofessory national property and the state of the state	0000000 v V V 2555 25 V V V 2555 25 V V V V V V V	ra seriantia tantan dan sa
the claim subject to offset?				
No				
Yes				

Debtor 1

Khaneidga Ka-aqua Harris

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Part 2:	List All o	f Your	NONPRIORITY	Unsecured	Claims
---------	------------	--------	-------------	-----------	--------

3.	Do any creditors have nonpriority un No. You have nothing to report in the Yes	nis part. Su	bmit this form to	the court with your other schedules.		
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one cre claims fill out the Continuation Page of	d claims in editor sepa editor holds	n the alphabetic rately for each cl	al order of the creditor who holds aim. For each claim listed, identify w	hat type of claim it is. Do not	s more than one list claims already
	l					Total claim
.1	Experian Nonpriority Creditor's Name			Last 4 digits of account numbe	r	•
	PO box 9600			When was the debt incurred?	06/12/2007	Ψ
	Number Street	~~~~		various to		
	Allen	TX	75013			
	City	State	ZIP Code	As of the date you file, the clair	n is: Check all that apply.	
				☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsec	ured claim:	
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commu			Obligations arising out of a sepa	aration agreement or divorce	
		mity dept		that you did not report as priority	y claims	
	Is the claim subject to offset?			Debts to pension or profit-sharir		
	Yes			Other. Specify		
		~800000180400000000000000000000000000000	t oder det om de de set set set set set set set set set se	indrit eter til stat i til stat til stat til stat til stat stat stat stat stat stat stat sta	likati kalendikat malisista tikutus ji taajinin partaalisi. Kantiinto ja tulisi oo fantsi of atti tatsi kantii	XXII Tillerta (m.) - 1774 XX tiller i 144 mins (44 tillerin vert lands ota vertilmis eta visit illeri
.2	Equifax			Last 4 digits of account number		\$
	Nonpriority Creditor's Name			When was the debt incurred?	06/12/2007	
	1550 Peachtree st Ne	····				4
	Atlanta	GA	30309	As of the date you file, the clain	is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsec	ured claim:	
	At least one of the debtors and another			Student loans		
	Check if this claim is for a commu	nity debt		Obligations arising out of a sepa that you did not report as priority		
	Is the claim subject to offset?			Debts to pension or profit-sharing		
	☑ No			Other. Specify		
	Yes					
3	TransUnion			Last 4 digits of account number	a vara en	uvermenn om allette til til en state et en ett stil fieldhillet der e emberet e etteret bet (1999).
	Nonpriority Creditor's Name				06/12/2007	\$
	555 W Adams St			When was the debt incurred?	30/12/2001	
	Number Street		60664	_		
	Chicago	State	60661 ZIP Code	 As of the date you file, the claim 	is: Check all that apply	
	•			☐ Contingent		
	Who incurred the debt? Check one. Debtor 1 only			Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsect	rad claim:	
	At least one of the debtors and another				arcu Uldiili.	
	☐ Check if this claim is for a commun	nity debt		Student loans Obligations arising out of a sepa	ration agreement or discover	
		,		that you did not report as priority		
	Is the claim subject to offset?			Debts to pension or profit-sharing		
	Yes			Other. Specify		
	the state of the s	10, 20, 1, 11 21 14, 114, 11, 14, 14, 14, 14, 14, 14, 1	ernes e en standagen en misje en sysjen engag vis	te opposit to the track of the party for the party and the order of the order of the order of the party of th	and a superior of the second seco	поинальный багантия 4 годинально, положного честного распол повременного бага в г

Debtor 1

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Khaneidga Ka-aqua Harris First Name Middle Name

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

THE ILLINOIS TOLLWAY	Last 4 digits of account number	_{\$} 1,500.0
Nonpriority Creditor's Name 2700 Ogden Avenue	When was the debt incurred? 03/12/2008	
Number Street Downers Grove IL	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
No	, , , , , , , , , , , , , , , , , , , ,	
Yes		PRINCISS CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CO
Americash Coans	Last 4 digits of account number	\$/500
Nonpriority Creditor's Name 11340 TOWENCE auc	When was the debt incurred? 10/13/20//	
Number Street 6 apr 5 10 Fl (0)438	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	ea Dispated	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify	
Orno Orno Orno		
Allied Tulerately, 1005	Last 4 digits of account number 3862	s///3º
Ionpoiently Creditor's Name 40 BOV 36/45	When was the debt incurred? 9599	
COLUMBUS OH 43236	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
_	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No Yes	Other. Specify	

Debtor 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				ting of (Charles and). Deat 4: Conditions with Priority Lineary and Claims
Number	Street		·····	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim
Number	Street			Part 2. Creditors with Nonphority Onsecuted Claim
····				Last 4 digits of account number
Dity		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
lame				1 Charle and D. Dort 1. Craditors with Driggity Hangeyrod Claims
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
4011Der	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
(920) - 122 (122 (122 (122 (122 (122 (122 (12	antanan kanan k			On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured
TOTAL DEL	Stroet			Claims
				Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame		***************************************		•
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City	e de la creativa de destructura de la creativa de l	State	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
Tall 10				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured
**************************************	Nation No.	~~~~~~		Claims
				Last 4 digits of account number
City <i>Control</i> es	oostatiin oo kaa kaa kaa kaa kaa kaa kaa kaa kaa	State Systematic State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Vame	W-440 - WHOM V			, , , , , , , , , , , , , , , , , , , ,
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Vumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
			· · · · · · · · · · · · · · · · · · ·	
City		State	ZIP Code	Last 4 digits of account number
Martenis - Administration - American - Ameri	economics as simulated and the control of the contr	Oppggggggggggggggggggggggggggggggggggg	AND THE PROPERTY OF THE PROPER	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				·
vumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
vuiiiQEf	Sucel			Part 2: Creditors with Nonpriority Unsecured Claims
				Olaina .
				Last 4 digits of account number

Debto	r 1	

Khaneidga Ka-aqua Harris

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	. Domestic support obligations	6a.	\$
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e.	Total. Add lines 6a through 6d.	6e.	\$
				8898 - 1844, 1874.
				Total claim
Total claims	6f.	Student loans	6f.	Total claim
Fotal claims from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	\$
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority	-	\$\$
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$\$

				DDIODITY alaims and Dart 2 for creditors wi	th NONPRIORITY claims.
Sched	ule E/F: Cre	editors W	ho Have l	Unsecured Claims	12/15
	Form 106E/F				
Case number (If known)					amended filing
United States	Bankruptcy Court for the:	Northern District of	Illinois		☐ Check if this is ar
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	10,777 - 17 - 17 - 17 - 17 - 17 - 17 - 17	
Debtor 1	First Name	Middle Name	Last Name		
	Khaneidga Ka-aqı	ıa Harris	<u> </u>		
Fill in this in	nformation to identify	your case:			
			Document	Page 53 of 94	

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of

No. 1	against you?			
Do any creditors have priority unsecured claims	s against your			
No. Go to Part 2.				
Yes.	the beautiful than and priority uncontrol claim list	the creditor ser	narately for	each claim. For
each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the c unsecured claims, fill out the Continuation Page of	editor has more than one priority unsecured claim, list a claim has both priority and nonpriority amounts, list claims in alphabetical order according to the creditor's Part 1. If more than one creditor holds a particular claims in the instruction backlet.	mat ciaim nere name. If vou ha	and show b	an two priority
(For an explanation of each type of claim, see the i	nstructions for this form in the instruction bookiet.)	Total claim		
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that ap	ply.		
City State ZIP Code	☐ Contingent			
Old	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	m of DOLODITY and alaims			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the governme	nt		
☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
Is the claim subject to offset?	Other. Specify			
☐ No	Grief, Specify			
U Yes		spelantina d speriores e en estaciones e propriores de production de la consequencia de l	CHESTOS AND	grand translation contributes and the property of the contributes of t
	Last 4 digits of account number	. \$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that ap	iply.		
	Contingent			
City State ZIP Code	Unliquidated			
City	Disputed			
Who incurred the debt? Check one.	- Probutor			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government	ent		
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
Is the claim subject to offset?	Other. Specify			
☐ No ☐ Yes				

Debtor 1

Khaneidga Ka-aqua Harris First Name Middle Name

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	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
umber Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
Sity State ZIP Code	Unliquidated			
only Charles and the control of the	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
No No				
Yes		AND THE PROPERTY OF THE PROPER	erani yana ada eran da maran sarah sarah da eran da er	zyk. A k swizer i swierdich k kil
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only	type of Prioritt ansecuted claim.			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
□ No				
		tenteri, koprej vod Circulari, koprej vod se obiol Circulari, k	estan yerene gisreti bir Abistatiya XV staye ide iskeelistiin eki in ti	ough province no military crass
	Last 4 digits of account number	\$	\$. \$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify	inggen www.comackyb.urgs.singh-polalogoodg.24%sinh94	ng _{ang} nagengelau berocassana synnassalegen Autobur Archord	(C-294400000-)
				
	Culor. Openi			
Is the claim subject to offset?	Culti. Opcony			

Debtor 1

Khaneidga Ka-aqua Harris First Name Middle Name

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Part 2:	List All of	Your NONPRIORITY	Unsecured Claim

	no any creditors have nonpriority unsecured class. No. You have nothing to report in this part. Sub Yes	mit this form to	you? the court with your other schedules. The seasons were a many research the street research to the seasons and the seasons are seasons as the seasons are seasons are seasons as the seasons are seasons as the seasons are seasons as the seasons are seasons are seasons as the seasons are seasons are seasons are seasons are seasons are seasons are seasons as the seasons are sea	
n ir	ist all of your nonpriority unsecured claims in onpriority unsecured claim, list the creditor separa included in Part 1. If more than one creditor holds a	the alphabetic	cal order of the creditor who holds each claim. If a creditor has laim. For each claim listed, identify what type of claim it is. Do not m, list the other creditors in Part 3.If you have more than three no	more than one list claims already
4.	The Cartesian Ca		the state of the same of the s	250.00
4.1	Tcf Bank Nonpriority Creditor's Name		Last 4 digits of account number	\$650.00
•	1401 Jefferson st Number Street		When was the debt incurred? 02/15/2012	
	joliet IL City State	60431 ZIP Code	As of the date you file, the claim is: Check all that apply.	: - : :
			Contingent	1
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	:
:	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
•	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	•
	No		Other, Specify	
	☑ Yes			inducate), with more representatives brottom to a translative of the report object reproductive or distribute of
4.2	vertenen som statistiske statister en en statister et en	and and the state of	Last 4 digits of account number	\$ 852.00
4.2	tcf bank Nonpriority Creditor's Name		When was the debt incurred? 08/21/2011	:
	1401 jefferson Number Street			
	joliet il	60431	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debt	s
	No		Other. Specify	•
	Yes			Districted the manufacture 2014 (ADIT to the statements of grants (Contraction), the statement of agree of the
4.3	Chase bank		Last 4 digits of account number	1,760.00
	Nonpriority Creditor's Name		When was the debt incurred? 03/17/2012	Ψ
	270 Park Ave			
	Number Street New York NY			
	11011	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	City		☐ Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar deb	ts
	₩ No		Other. Specify	_
	Yes	-		

Debtor 1

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Khaneidga Ka-aqua Harris

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

USA bank		····	Last 4 digits of account number	r <u> </u>	\$ <u>750.0</u>
Nonpriority Creditor's Name 800 Nicollet Mall			When was the debt incurred?	02/18/2013	
Number Street Minneapolis,	Minnes	55402	As of the date you file, the claim	n is: Check all that apply.	
	tate	ZIP Code	Contingent		
Who incurred the debt? Check one.			☐ Unfiquidated☐ Disputed		
Debtor 1 only			□ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecu	red claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans		
			Obligations arising out of a sepa you did not report as priority clai	aration agreement or divorce that ims	
Check if this claim is for a community	y debt		Debts to pension or profit-sharing	ng plans, and other similar debts	
Is the claim subject to offset? ☑ No			Other Specify		
Mo. □ Yes					
	TO A	e egymesa svic engune Savessane (Savessan), é a 2 Saves († 2 Savessa) egymesa se Principa Nassanessa	Last 4 digits of account number	ineralises (A 2 mill 14 (2 mill 2 mill) kys semenamians storiet saturatives (2 mill 2 mill) kys semenamians s	s 1,200.0
South Division Credit Union Nonpriority Creditor's Name			_	04/01/2014	
9122 S Kedzie Ave			When was the debt incurred?	<u>UT/U 1/2U 1T</u>	
Number Street		60629	As of the date you file, the claim	n is: Check all that apply	
	tate	ZIP Code	☐ Contingent		
•			Unfiquidated		
Who incurred the debt? Check one.			☐ Disputed		
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecu	red claim:	
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and another			Obligations arising out of a sepa		
Check if this claim is for a communit	y debt		you did not report as priority cla Debts to pension or profit-sharir		
Is the claim subject to offset?			Other, Specify		
⊠ No □ Yes					
en companya da da sa da sa		epodych przes stanie pydagowy po powopa w wielinki wieli	Last 4 digits of account number	ar december are 3 de 1950 de Version de reseaure me maiores de la Nobre Leve estre de la Nobre Leve de Leve de	\$ 1500
Nonpriority Creditor's Name 200 Luke Street	L. E	X0-08-A	When was the debt incurred?	10/13/12	
Number Street Way 2 ata, MN 5	539	1-1693	As of the date you file, the claim	n is: Check all that apply.	
City	tate	ZIP Code	Contingent		
Who incurred the debt? Check one.			Unliquidated Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecu	red claim:	
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and another			Obligations arising out of a sepa you did not report as priority cla		
Check if this claim is for a communit	ty debt		Debts to pension or profit-sharing		
Is the claim subject to offset?			Other. Specify		

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Case number (if known)

Debtor 1

Khaneidga Ka-aqua Harris

Middle Name

List Others to Be Notified About a Debt That You Already Listed

Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Last 4 digits of account number ___ ___ ZIP Code State On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Street Number Last 4 digits of account number ___ __ __ ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Street Number Claims Last 4 digits of account number ___ __ ___ ZIP Code State On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Number Claims Last 4 digits of account number ______ ZIP Code State City On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Name Part 2: Creditors with Nonpriority Unsecured Number Claims Last 4 digits of account number ___ __ __ ZIP Code State City On which entry in Part 1 or Part 2 did you list the original creditor? Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Name ☐ Part 2: Creditors with Nonpriority Unsecured Number Claims Last 4 digits of account number ___ __ __ ZIP Code State City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Number Street Claims Last 4 digits of account number ____ ___ ZIP Code State City

Debtor 1

Khaneidga Ka-aqua Harris

Document

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Middle Name

Last Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the a	amo: mou	unts of certain types of unsecured claims. This informaints for each type of unsecured claim.	ition is	s for statistical reporting purposes only. 28 U.S.C. § 159.
				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ s
	6e.	Total. Add lines 6a through 6d.	6e.	\$
				Total claim
Total claims		Student loans	6f.	\$
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6 i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$
	6j.	Total. Add lines 6f through 6i.	6j.	\$

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Debtor 1

Khaneidga Ka-aqua Harris
First Name Middle Name t Case number (if known)_ Last Name

(Column 1	: Your codebtor		Column 2: The creditor to whom you owe the	e debt
_]				Check all schedules that apply:	
	Nama a		·····	Schedule D, line	
	Name			☐ Schedule E/F, line	
	Number	Street		□ Schedule G, line	
	City		State	ZIP Code	·**
_]				Schedule D, line	
	Name			☐ Schedule E/F, line	
	Number	Street	·	□ Schedule G, line	
	City		State	ZIP Code	
		**************************************	A NATIONAL COMMISSION OF THE CONTRACT AND A PROPERTY OF THE COMMISSION OF THE COMMIS		TO PARTICULAR A PARTICULAR ARTS
	Name			Schedule D, line	
				☐ Schedule E/F, line	
	Number	Street		Schedule G, line	
	City		State	ZIP Code	niet ienerte ktommeteren
-				Schedule D, line	
	Name	The state of the s		Schedule E/F, line	
	Number	Street		Schedule G, line	
	City	<u> </u>	State	ZIP Code	
_	t a mitra di Migra a sum a mate unu traccia un tr			TOTAL TO THE STATE OF THE ACTION AS A SALES AND	of the first of the second
	Name		Week the Michigan Week and the Market Market franchis for a state for a second	Schedule D, line	
				Schedule E/F, line	
	Number	Street		Schedule G, line	
	City		State	ZIP Code	the distribution of the section of t
_]	Name			Schedule D, line	
	Name			☐ Schedule E/F, line	
	Number	Street		□ Schedule G, line	
	City		State	ZIP Code	
-					
_	Name	**************************************		Schedule D, line	
				Schedule E/F, line	
	Number	Street		Galeddie G, mie	
	City		State	ZIP Code	ngan ngapanggan ngapagan ngapagan
				Schedule D, line	
	Name			Schedule E/F, line	
	Number	Street		Schedule G, line	
•	City		State	ZiP Code	
	~~~		TOUR DESCRIPTION OF THE PROPERTY OF THE PROPER		

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	Fill in this information to identify your case:					
1	Debtor 1 Khaneidga Kaaqua Harris					
	First Name Middle Name	Last Name				
	Debtor 2 Spouse, if filing) First Name Middle Name	Last Name				
1	United States Bankruptcy Court for the: Northern District	of Illinois				
1	Case number					ck if this is an
	(if known)				ame	nded filing
<u>C</u>	official Form 106E/F					
S	chedule E/F: Creditors W	/ho Have Unseci	ared Clain	ns		12/15
Lis A/ cre ne an	e as complete and accurate as possible. Use Part the other party to any executory contracts or u B: Property (Official Form 106A/B) and on Schedleditors with partially secured claims that are listeded, copy the Part you need, fill it out, number to additional pages, write your name and case number that are listed.  List All of Your PRIORITY Unsecured.	nexpired leases that could result use G: Executory Contracts and a din Schedule D: Creditors Who the entries in the boxes on the lease (if known).	t in a claim. Also li Unexpired Leases ( Have Claims Secur	st executory co Official Form 1 ed by Property	ontracts on S 06G). Do not v. If more spa	chedule include any ce is
			· · · · · · · · · · · · · · · · · · ·			
7.	Do any creditors have priority unsecured claims No. Go to Part 2. Yes.	s against you?				
2.	List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cursecured claims, fill out the Continuation Page of I	a claim has both priority and nonpr claims in alphabetical order accordi Part 1. If more than one creditor ho	iority amounts, list thing to the creditor's nilds a particular claim	at claim here ar ame. If you hav	nd show both e more than to	priority and vo priority
	(For an explanation of each type of claim, see the it	nstructions for this form in the instr	uction booklet.)	Total claim	Priority	Monniorita
	<b>a</b>			3 Otal Classii	amount	Nonpriority amount
2.1		1 4 4 42 45 45		\$	¢	¢
	Priority Creditor's Name	Last 4 digits of account number		<b>Y</b>	- *	Y
	Number Street	When was the debt incurred?	NAMES OF THE PARTY			
		As of the date you file, the claim	ic. Check all that anni-	,		
		Contingent	is. Oncor all that apply			
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only					
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured	claim:			
	At least one of the debtors and another	Domestic support obligations				
	Check if this claim is for a community debt	Taxes and certain other debts yo				
	•	Claims for death or personal injuintoxicated	y while you were			
	Is the claim subject to offset?	Other. Specify				
	□ vaa					
2.2	]					
	Priority Creditor's Name	Last 4 digits of account number		\$	\$	\$
		When was the debt incurred?				
	Number Street	As of the date you file, the claim	is: Check all that apply			
		Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only	Type of PRIORITY unsecured of	laim:			
	Debtor 2 only	Domestic support obligations	***			
	Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts yo	u owe the government			
	At least one of the debtors and another	Claims for death or personal injur				
	☐ Check if this claim is for a community debt	intoxicated				
	Is the claim subject to offset?  No Yes	Other. Specify				

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Debtor 1

Khaneidga Kaaqua Harris

i i a i ciaga i	Raaqua Hailis		
irst Name	Middle Name	Last Name	

Case number (if known)

listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
	Last 4 digits of account number	\$	\$	. \$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
D Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government  Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
- Oneck it this clash is for a community desir	Other. Specify			
s the claim subject to offset?				
⊒ No				
☐ Yes				
		¢	•	¢
Priority Creditor's Name	Last 4 digits of account number	\$	· *	_ •
	When was the debt incurred?			
vumber Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government  Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
2 Check it this claim is for a community debt	Other, Specify			
s the claim subject to offset?				
⊒ No				
☐ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	Last 4 digits of account number	**************************************		· ·
	When was the debt incurred?			
iumber Street	As of the date you file, the claim is: Check all that apply.			
	-			
NA.	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	www. scropulou			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated  Other. Specify			
e the claim subject to offeet?	- OBSI. OPONIY			
s the claim subject to offset?				
⊒iNo DiYes				

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Debtor 1

Khaneidga Kaaqua Harris

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Case number (# known)

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	1662
24 · 1 · 1 · 1 · 1 · 1 · 1	258
20 x 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.0

#### **List All of Your NONPRIORITY Unsecured Claims**

4. L	nonpriority unsecured claim, list the cre	ditor separ	ately for each	ical order of the creditor who holds e claim. For each claim listed, identify who	at type of claim it is. Do not	list cla	ims aiready
	ncluded in Part 1. If more than one cre claims fill out the Continuation Page of		a particular cla	aim, list the other creditors in Part 3.If yo	ou have more than three no	npriori	ty unsecured
						Tota	al claim
4.1	Value Auto mart			Last 4 digits of account number		•	11,500.00
	Nonpriority Creditor's Name			When was the debt incurred?	04/11/2014	\$	11,000.00
	2734 N Cicero  Number Street			THEN WAS THE GEOLINGERED!			
	Chicago	IL	60639				
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
				Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only			·			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:		
	At least one of the debtors and another	r		Student loans			
	☐ Check if this claim is for a commu	ınity debt		Obligations arising out of a separ			
	Is the claim subject to offset?	,		that you did not report as priority  Debts to pension or profit-sharing			
	2 No			Other, Specify		•	
	Yes			Carer, Opecity			
					ga titata, a ayan tatayata ayan ayan ayan ayan aya		
4.2				Last 4 digits of account number	and the second s	\$	
	Nonpriority Creditor's Name			When was the debt incurred?			
	Number Street			As of the date you file, the claim	is: Check all that apply		
	City	State	ZIP Code		to broad an indicappiy		
		State	2000	Contingent			
	Who incurred the debt? Check one.			Unliquidated Disputed			
	Debtor 1 only			Ca Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another	,		Student loans			
	At least one of the deplots and another			Obligations arising out of a separ	ration agreement or divorce		
	☐ Check if this claim is for a commu	mity debt		that you did not report as priority	claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing	- '		
	□ No			Other. Specify	· · · · · · · · · · · · · · · · · · ·		
	☐ Yes						
4.3				Last 4 digits of account number			
·	Nonpriority Creditor's Name	-,		When was the debt incurred?		\$	
	Number Street	····					
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	Who incurred the debt? Check one.			☐ Contingent			
	_			Unliquidated			
	Debtor 1 only Debtor 2 only			Disputed			
	Debtor 1 and Debtor 2 only			T EAIDAIRDIADITY			
	At least one of the debtors and another			Type of NONPRIORITY unsecu	ired claim:		
	_			Student loans			
	Check if this claim is for a commu	inity debt		Obligations arising out of a separ that you did not report as priority			
	Is the claim subject to offset?			Debts to pension or profit-sharing			
	□ No			Other. Specify			
	Yes			And the state of the control of the state of the sta			

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Debtor 1

Khaneidga Kaaqua Harris First Name Middle Name

Case number (if known),

Page 2	
Mary Control of the Control	

#### Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this page, number them beginning wi	and the state of t	Total cla
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	1
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☐ No ☐ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	Ψ
Number Street		
	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☐ No ☐ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
	☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Student loans  Obligations of single out of a consection personnent as discrete that	
☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
·	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No ☑ Yes		

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Debtor 1

Khaneidga Kaaqua Harris
First Name Middle Name

Case number (if known)_

Part 3a

#### List Others to Be Notified About a Debt That You Already Listed

5.	Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For
	example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or
	2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the
	additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				tine of (Charleson). The Continue with Driving the University Charleson
Number	Street		***************************************	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Nama				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
City		State	ZIF CODE	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				and the state of t
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
1401100	dieet			Part 2: Creditors with Nonpriority Unsecured Claims
			And the second s	Last 4 digits of account number
City		State	ZIP Code	
Name			~	On which entry in Part 1 or Part 2 did you list the original creditor?
· tunic				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street	***************************************		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City	and a state of the	State	ZIP Code	
Name		<del></del>		On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): 🔲 Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			***************************************	Claims
City	***************************************	State	ZIP Code	Last 4 digits of account number

Deptor 1

Khaneidga Kaaqua Harris

Laşt	Name	

Case number (if	known)		

Pant 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6 <b>d</b> .	+\$
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	<ol> <li>Other. Add all other nonpriority unsecured claims.</li> <li>Write that amount here.</li> </ol>	6i.	+ \$
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$

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		I	Document	Page 66 of 94	
Fill in this i	nformation to ide	entify your case:			
Debtor	Khaneidga Ka	a-aqua Harris	Last Name		
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name	and the first of t	
United States  Case number (If known)	Bankruptcy Court fo	r the: Northern District of A	ulabama 		☐ Check if this is an amended filing
Official I	orm 1060	3_			
Sched	ule G: Ex	cecutory Co	ıtracts a	nd Unexpired Leases	12/15
information.	f more space is		onal page, fill it ou	ng together, both are equally responsible for su ut, number the entries, and attach it to this page	

1. Do you have any executory contracts or unexpired leases?

Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o		with whom you	ı have the co	ntract or lease		State w	hat the contr	act or lease is for
2.1		edit	Accep	Hanox	2		For	my	vehicle
	Name as		west	12 n	vile Ref	<del></del>		Ŭ	
	Number S C	Street UHP C	eld,	MI ZIP Code	48034				
2.2	•	t good and the control of the desired and the control of the contr	Othic	ecolor at with the country then	estenne ventras e descendo stendentes e encentras es	on en como no actividad na calenda de como de c	i, mitt och annintrates mittelle ette het der det het filmet i det filmet de det filmet de	en des el monte entre entre en entre en entre en en en entre en	wyddiaeth y gylla mgyn mae a gyrca a mae gan hannau fan fel a fan Collag a fla ei dy'n Cella gan bai'r eild a e Can y channau gan a
	Name					***************************************			
:	Number	Street		<del></del>					
2.3	City	Server II sandry a court proper of enterer	State	ZIP Code		**********************	ann meet me maallet maange een de meety t	en, må eg haveg ver my veg etter enny ge myttergred	en programment samen samen en programment en mente des transces des programmes es transceptors e en programme
	Name					<del> </del>			
	Number	Street				<del></del>			
, construction by	City	Charles and the state of the st	State  State	ZIP Code			والمعارض والمهاري والمراوي وا	e ment at travers to secrete energy product i representati	માર્ચ લાગ એન્સર્સન્સન્સન પ્રેડ પ્રદેશને છે કે સ્થાપન સ્ટેડ રે છે કે સ્થાપન સ્ટેડ સ્ટ
2.4	Name					***************************************			
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interviewe	City		State	ZIP Code	NAN TELANGARAN NING ARAN NANGUNINGSI NANGUNINGSI NANGUNINGSI NANGUNINGSI NANGUNINGSI NANGUNINGSI NANGUNINGSI N	ngallo vi nobilo stoleti ballon vi li	ndaka proposo prosopostostostoposos (Katolina)		E CONNECTION (CERT A THE COURT PRINTS OF CONTROL OF COURT PRINTS OF COURT PRIN
2.5	Name		Hattor Later						
	Number	Street	······································			·			
	City	<u>, ,</u>	State	ZIP Code					

Case 16-01909 Doc 1 Filed 01/22/16 Entered 01/22/16 10:17:39 Desc Main Page 67 of 94 Document Khaneidga Ka-aqua Harris Debtor 1 Case number (if know Middle Name Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2.2 Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code 2._ Name Number Street City ZIP Code State Name Number Street City State ZIP Code Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2.

Name					
Number Stre	et .	······································			
City	State	ZIP Code			
	ne ancomo de transcontración poste estato especía los cocioses presidentes escalo		ed de la lactica de la companya de l	Сельно серинал залана заношения населения со серина закона	
Name					
Number Stree	et .				
City	State	ZIP Code			

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Debtor 1	Khaneidga Ka	a-aqua Harris		
•	First Name	Middle Name	Last Name	<del>'                                    </del>
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	r the: Northern District of II	linois	

Official Form 106H

## **Schedule H: Your Codebtors**

12/15

☐ Check if this is an amended filing

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Do you ha ✓ No	ave any codebtors? (If you are filing a joint case, do	not list either spouse as a codebtor.)
Yes		
	e last 8 years, have you lived in a community prop California, Idaho, Louisiana, Nevada, New Mexico, Pu	perty state or territory? (Community property states and territories include uerto Rico, Texas, Washington, and Wisconsin.)
	to to line 3.	
Yes. D	Did your spouse, former spouse, or legal equivalent li	ve with you at the time?
☐ No		
☐ Ye	es. In which community state or territory did you live?	Fill in the name and current address of that person.
Na	ame of your spouse, former spouse, or legal equivalent	
No	umber Street	
Cit	ity State	ZIP Code
in Column	n 1 liet all of your codebtore. Do not include your	spouse as a codebtor if your spouse is filing with you. List the person
Schedule		guarantor or cosigner. Make sure you have listed the creditor on rm 106E/F), or Schedule G (Official Form 106G). Use Schedule D,
Schedule Schedule	e D (Official Form 106D), Schedule E/F (Official Form E/F, or Schedule G to fill out Column 2.  1: Your codebtor	<del>-</del>
Schedule Schedule	E/F, or Schedule G to fill out Column 2.	rm 106E/F), or <i>Schedule G</i> (Official Form 106G). Use <i>Schedule D</i> ,  .  .  .  .  .  .  .  .  .  .  .  .  .
Schedule Schedule	E/F, or Schedule G to fill out Column 2.	rm 106E/F), or Schedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the del  Check all schedules that apply:  Schedule D, line
Schedule Schedule Column	E/F, or Schedule G to fill out Column 2.  1: Your codebtor	Column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor of the cr
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Schedule Schedule Column 1	E/F, or Schedule G to fill out Column 2.  1: Your codebtor	Column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the column 2: The creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor to whom you owe the decomposition of the creditor of the cr
Schedule Schedule Column Name Number City	E/F, or Schedule G to fill out Column 2.  1: Your codebtor  Street	Column 2: The creditor to whom you owe the del  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line ZIP Code
Schedule Schedule Column 1 Name	E/F, or Schedule G to fill out Column 2.  1: Your codebtor  Street	Column 2: The creditor to whom you owe the delection of the column 2: The creditor to whom you owe the delection of the column 2: The creditor to whom you owe the delection of the column 2: The creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor to whom you owe the delection of the creditor of the creditor to whom you owe the delection of the creditor of the
Schedule Schedule Column Name Number City	E/F, or Schedule G to fill out Column 2.  1: Your codebtor  Street	Column 2: The creditor to whom you owe the de  Check all schedules that apply:  Schedule D, line Schedule E/F, line ZIP Code  Schedule D, line Schedule D, line Schedule G, line Schedule D, line
Schedule Schedule Column 1 Name Number City Name	E/F, or Schedule G to fill out Column 2.  1. Your codebtor  Street  State	Column 2: The creditor to whom you owe the de  Check all schedules that apply:  Schedule D, line Schedule E/F, line ZIP Code  Schedule D, line Schedule G, line Schedule G, line Schedule D, line Schedule G, line Schedule D, line
Schedule Schedule Column Name Number City	E/F, or Schedule G to fill out Column 2.  1: Your codebtor  Street  State	Column 2: The creditor to whom you owe the de  Check all schedules that apply:  Schedule D, line Schedule E/F, line ZIP Code  Schedule D, line Schedule D, line Schedule G, line Schedule D, line
Schedule Schedule Column 1 Name Number City Name Number City	E/F, or Schedule G to fill out Column 2.  1. Your codebtor  Street  State	Column 2: The creditor to whom you owe the de  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line ZIP Code  ZIP Code  ZIP Code  ZIP Code
Schedule Schedule Column 1 Name Number City Name	E/F, or Schedule G to fill out Column 2.  1. Your codebtor  Street  State	Column 2: The creditor to whom you owe the de Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line ZIP Code  ZIP Code  Schedule G, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line
Schedule Schedule Column 1 Name Number City Name Number City	E/F, or Schedule G to fill out Column 2.  1. Your codebtor  Street  State	Column 2: The creditor to whom you owe the del Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule G, line
Schedule Schedule Column 1 Name Number City Name City	Street  Street  Street  State	Column 2: The creditor to whom you owe the de Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line ZIP Code  ZIP Code  Schedule G, line Schedule G, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line

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Fill in this information to identif	y your case:					
Debtor 1 Khaneidga Ka-a	αua Harris					
First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		<del></del>		
United States Bankruptcy Court for the	: Northern District of Illinois					
Case number				Charl	c if this is:	
(If known)					or unis is.  amended filing	
					•	ring postpetition chapter 13
Official Forms 1001				inc	come as of the fol	lowing date:
Official Form 106I				MM	1 / DD / YYYY	
Schedule I: You	ur Income					12/15
Be as complete and accurate as p supplying correct information. If y if you are separated and your spo separate sheet to this form. On the Part 1: Describe Employn	rou are married and not tili use is not filing with you, e top of any additional pag	ing jointly, and y do not include in	our s	spouse is living wi	ith you, include in	formation about your spouse.
Fill in your employment information.		Debtor 1	2.5		Dobtor 2	or non-filing spouse
If you have more than one job,		10000000000000000000000000000000000000	excited have pro-y		Deptor 2 t	or mon-ming spouse
attach a separate page with information about additional	Employment status	<b>☑</b> Employed			☐ Emplo	wed
employers.		Not emplo	yed		☐ Not em	•
Include part-time, seasonal, or self-employed work.						
Occupation may include student or homemaker, if it applies.	Occupation	Adminstrativ	e As	sst (Intern)		
	Employer's name	Jesse Brown	ı VA			
	Francisco de caldono.					
	Employer's address	820 S. Dame Number Street			Number Str	eet
		Chicago IL 6	0612	2		
		********				
		City	Sta	te ZIP Code	City	State ZIP Code
	How long employed there	e? 3yrs			3yrs	
Part 2: Give Details About	Monthly Income		•			
		lf t				
Estimate monthly income as of spouse unless you are separated.						•
If you or your non-filing spouse ha below. If you need more space, at	ve more than one employer tach a separate sheet to this	, combine the info s form.	rmati	on for all employer	s for that person on	the lines
				For Debtor 1	For Debtor 2 non-filing sp	
<ol><li>List monthly gross wages, sala deductions). If not paid monthly, or</li></ol>	ary, and commissions (before all culate what the monthly was a second to the control of the cont	ore all payroll vage would be.	2.	\$_2,200.00	\$	
3. Estimate and list monthly overt	time pay.	•	3.	+ \$ 0.00	+ \$	
4. Calculate gross income. Add lin	e 2 + line 3.		4.	\$_2,200.00	\$	

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Case number (if known)

Debtor 1

Khaneidga Ka-aqua Harris
First Name Middle Name Last Name

		Fo	r Debtor 1	For Debtor		
Copy line 4 here	. → 4.	\$_	2,200.00	\$	Chi China Ch	
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	æ	224.00	¢.		
5b. Mandatory contributions for retirement plans	5b.	T	0.00	•		
5c. Voluntary contributions for retirement plans	5c.		0.00			
5d. Required repayments of retirement fund loans	5d.	-	0.00	• •		
5e. Insurance	5e.	\$	0.00	-		
5f. Domestic support obligations	5f.	\$	0.00	\$	·	
5g. Union dues	5g.	\$	0.00			
5h. Other deductions. Specify:	5h.	+ \$	0.00	+ s		
6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5f	h. 6.	\$_	324.00	\$		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,876.00	\$		
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	<del></del>	
8b. Interest and dividends	8b.	\$	0.00	\$		
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ent	· <u></u>		\ \		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	<del></del>	
8d. Unemployment compensation	8d.	\$	0.00	\$	MATERIAL CONTRACTOR	
8e. Social Security	8e.	\$	0.00	\$		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: food stamps	nce 8f.	\$	265.00	\$		
8g. Pension or retirement income		<i>c</i>	0.00			
·	8g.	. \$		\$		
8h. Other monthly income. Specify:	8h. I	+ \$	0.00	+\$		:
9. <b>Add all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	265.00	\$		
<ol> <li>Calculate monthly income. Add line 7 + line 9.</li> <li>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.</li> </ol>	10.	\$	2,141.00	+ \$		\$
<ol> <li>State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.</li> </ol>	your de	epende				
Do not include any amounts already included in lines 2-10 or amounts that are Specify: food stamps	not av	ailable	to pay expen	ses listed in <i>Sche</i> —	dule J. 11, <b>+</b>	\$ 265.00
<ol> <li>Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S</li> </ol>	result Statistic	is the o	combined mor rmation, if it a	nthly income. pplies	12.	\$2,141.00
13. Do you expect an increase or decrease within the year after you file this	form?					monthly income
Yes. Explain:	~					

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Fill in this information to identify	your case:			
Debtor 1 Khaneidga Ka-aqu	ua Harris	01 1.764		
First Name Debtor 2	Middle Name £ast Name	Check if this		
(Spouse, if filing) First Name	Middle Name Last Name	An amen	•	tpetition chapter 13
United States Bankruptcy Court for the:	Northern District of Illinois		as of the followin	
Case number (If known)		MM / DD /		
Official Form 106J	-			
Schedule J: You	ur Expenses			12/15
Be as complete and accurate as poinformation. If more space is neede (if known). Answer every question.  Part 1: Describe Your Hou	ed, attach another sheet to this form	ing together, both are equally res n. On the top of any additional pag	ponsible for supply ges, write your nam	ring correct se and case number
	senoia			
1. Is this a joint case?				
☑ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a s	eparate household?			
☐ No☐ Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		Daughter	18	☐ No ☑ Yes
		Daughter	.12	□ No ☑ Yes
		Daughter	08	☐ No ☑ Yes
		Son	<u>15</u>	□ No ☑ Yes
				□ No
				Yes
<ol> <li>Do your expenses include expenses of people other than yourself and your dependents?</li> </ol>	☑ No ☐ Yes			
Part 2: Estimate Your Ongoin	na Monthly Expenses			emmanyahpanyahpanyama (a mmamanya) a yi Adamirk sida Turkas sida kumb
Estimate your expenses as of your expenses as of a date after the bank applicable date.	cruptcy is filed. If this is a suppleme	ental <i>Schedule J</i> , check the box a		
Include expenses paid for with non- such assistance and have included			Your expe	BECOMMON SERVICES
4. The rental or home ownership ex		•	Tour expe	
any rent for the ground or lot.	position for four residence. Include	mat mongage payments and	4. \$	1,000.00
If not included in line 4;  4a. Real estate taxes			An 6	0.00
4b. Property, homeowner's, or re	nter's insurance		4a. \$	0.00
4c. Home maintenance, repair, a			4b. \$4c. \$	60.00
4d. Homeowner's association or	, , ,		4d. \$	0.00
			T	T

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Debtor 1

Khaneidga Ka-aqua Harris
First Name Middle Name Last Name

Case number (if known)_____

			Your exp	enses .
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection	6b.	\$	05.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	€ď.		
7.	Food and housekeeping supplies	7.	\$	200.00
8.	Childcare and children's education costs	8.	\$	180.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	20.00
11.	Medical and dental expenses	11.	\$	0.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	125.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		*	
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	100.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		*	0.00
	Specify:	16.	\$	0.00
17,	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	159.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20đ.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor	1	Khaneidga Ka-aqua Ha	Arris Last Name	Case number (if ki	70WN)	· · · · · · · · · · · · · · · · · · ·	77 Mary 1997 August (August 1997 August 19
21. <b>O</b>	ther. S	Specify:	, , , , , , , , , , , , , , , , , , ,		21.	+\$	0.00
22. <b>C</b> :	alculat	te your monthly expenses.					
22	a. Add	l lines 4 through 21.			22a.	\$	2,099.00
22	b. Cop	by line 22 (monthly expenses	for Debtor 2), if any, from Official Form 106	J-2	22b.	\$	
22	c. Add	l line 22a and 22b. The result	is your monthly expenses.		22c.	\$	2,099.00
						<u> </u>	
23. <b>Ca</b> l	culate	your monthly net income.					2 141 00
23a	. Cor	py line 12 (your combined mo	nthly income) from Schedule I.		23a.	\$	2,141.00
23b	. Cor	py your monthly expenses from	n line 22c above.		23b.	-\$	2,099.00
23c	Sub	otract your monthly expenses	from your monthly income.				42.00
	The	e result is your <i>monthly net inc</i>	ome.		23c.	\$	42.00
			·				
24. <b>Do</b>	you ex	xpect an increase or decrea	se in your expenses within the year afte	r you file this form?			
		- · · · · · · · · · · · · · · · · · · ·	ying for your car loan within the year or do ase because of a modification to the terms	• •			
Ø	No.						
	Yes.	Explain here:	i bi 14/14/14/milat milateleasel secontes ann as secontes ann amparamana impire, 17/milatelea filosofici belain		************	NAME OF THE PARTY	The second secon
			•				

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Fi	II in this information to identify	y your case:			
De	ebtor 1 Khaneidga Ka-ad	qua Harris		_	
D.	First Name	Middle Name Last Name	Check if this		
	pouse, if filing) First Name	Middle Name Last Name	An amen	_	
Un	nited States Bankruptcy Court for the:	Northern District of Illinois		ment showing post s as of the following	tpetition chapter 13 g date:
	se number known)		MM / DD /	YYYY	
Of	ficial Form 106J-2				
S	chedule J-2: E	Expenses for Sepa	rate Household o	of Debtor	2 12/15
Deb only need ques	tor 2 have one or more depend with respect to expenses for ded, attach another sheet to the stion.  Describe Your Hour by you and Debtor 1 maintain see	eparate households?	s on both Schedule J and this for hedule J. Be as complete and ac	rm. Answer the qui curate as possible.	estions on this form If more space is
2. De	o you have dependents?	□ No			
Do	o not list Debtor 1 but list all	Yes. Fill out this information for	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
re de	her dependents of Debtor 2 gardless of whether listed as a ependent of Debtor 1 on chedule J.	each dependent	Note: The Address of Control of C		☐ No ☐ Yes
Do	o not state the dependents'				☐ No ☐ Yes
na	imes.				□ Yes □ No
					Yes
					☐ No ☐ Yes
Constant of the constant of th					☐ No ☐ Yes
ex yo	your expenses include penses of people other than urself, your dependents, and ebtor 1?	☐ No ☐ Yes			
Part	2: Estimate Your Ongoi	ng Monthly Expenses	was defined in the distribution of the content of the content of the distribution of the content of the conte	inanty anti-attender volume in version to the extension and an extension and an extension and an extension and	grande entre entre montentre la transmistrativa de distributat de distributat de distributat de distributat de
		bankruptcy filing date unless you a			
	nses as of a date after the ban		e using this form as a suppleme	nt in a Chapter 13 c	ase to report
		-cash government assistance if you it on Schedule I: Your Income (Offic		Your exper	1505 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 -
4. TI		xpenses for your residence. Include	· ·	\$	PHARMACHA CONTRACTOR C
	not included in line 4:			••	
46	a. Real estate taxes			4a. \$	
41	o. Property, homeowner's, or re	enter's insurance		` <del></del>	
40	. Home maintenance, repair, a	and upkeep expenses			:
40	d. Homeowner's association or	condominium dues			
		A Company of the Comp	and the second s		

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Debtor 1 Khaneidga Ka-aqua Harris Case number (if known)
First Name Middle Name Last Name

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	S
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 108I).	18.	s
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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De	ebtor 1	Khaneidga Ka-aqua Harris Case number (if known	1)		· · · · · · · · · · · · · · · · · · ·
21.	Other. S	ecify:	21.	+\$	
22.	The resul	ithly expenses. Add lines 5 through 21. is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the uses for Debtor 1 and Debtor 2.	22.	\$	
23.	Line not us	ed on this form.			
24.	Do you ex	pect an increase or decrease in your expenses within the year after you file this form?			
	•	e, do you expect to finish paying for your car loan within the year or do you expect your ayment to increase or decrease because of a modification to the terms of your mortgage?			
	☐ No. ☐ Yes.	Explain here:			

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Debtor 1	Khaneidga Ka	a-aqua Harris		
· · · · · · · · · · · · · · · · · · ·	First Name	Middle Name	Last Name	
Debtor 2				
Spouse, if filing)	First Name	Middle Name	Last Name	
nited States I	ankruptcy Court fo	r the: Northern District of I	llinois	
Inited States E ase number If known)	ankruptcy Court fo	r the: Northern District of I	linois	☐ Check if t

Official Form 106Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?	
☑ No		
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
	Signature (Official Form 119).	
	d the summary and schedules filed with this declaration and	
that they are true and correct.		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Intellitus	<b>x</b>	
Khaheidga K. Harris		
Signature of Debtor 1	Signature of Debtor 2	
Data 01/13/2016	Date	:
Date U1/13/2010 MM/ DD / YYYY	Date MM / DD / YYYY	1
		April 100 pages

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Fill in this information to identify your case:	
Debtor 1 Khaneidga Kaaqua Harris Fist Name Middle Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: District of	
United States Bankruptcy Court for the: District of  Case number	M Observation :
(if known)	Check if this is an amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Inf	ormation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amend your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	or supplying corect
Partii: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 3,300.00
1c. Copy line 63, Total of all property on Schedule A/B	s3,300.00
Part 2: Summarize Your Liabilities	
2 Schedule D: Creditore Who Hove Claims Sequend by December (Office Lands)	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 78,514.00
Your total liabilities	\$ 78,514.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	s 2,141.00
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$2,099.00

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Debtor 1			a Kaaqua Hai	rris		Case number (# known)					
First Name Middle Name Last Name											
P	art 4:	Answer Th	ese Questions	s for Administrati	ve and Statistical Record	is					
6.	Are you	u filing for ba	nkruptcy under	Chapters 7, 11, or 1	13?						
	No. V Yes	You have not	hing to report on	this part of the form.	Check this box and submit this	form to the court with your oth	er schedules.				
7.	What ki	nd of debt do	you have?								
					r debts are those "incurred by a put lines 8-9g for statistical purp		sonal,				
			ot primarily con ourt with your other		ave nothing to report on this pa	art of the form. Check this box	and submit				
8.				t <b>Monthly Income</b> : C Line 11; <b>OR</b> , Form 1	copy your total current monthly i 122C-1 Line 14.	income from Official	\$2,200.00				

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	s0.00
9d. Student loans. (Copy line 6f.)	s0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$

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Debtor 1

Khaneidga Ka-aqua Harris

Maneluga	Na-ayua i	Idilio
First Name	Middle Name	Last Name

Case number (if known)

	First Name	Middle Name	Last Name		
Part 2:	List Othe	rs to Be Noti	lied for a Debt	That You Airead	y Listed
agency is you have	trying to colle more than one	ct from you for any creditor for any	a debt you owe to	someone else, list tl vou listed in Part 1.	a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
				fig. effice	On which line in Part 1 did you enter the creditor?
Name		·····	,		Last 4 digits of account number
Numbe	er Street				
	<del></del>			-	
City			State	ZIP Code	<u>-</u>
	dellistet of severe, sesses a reserve and executive expression	est forgonist to describe I for the object of the second confidence of	era populari, esperiente de la proportiona de la composition della	ag gangga na spendulan mananga dan malabada kada akada kamana sebada a ta	er Med Ladindela Standard des antique and an accompanion and an appropriate and accompany to the accompany to the second standard and accompany to the second standard accompany to the second standar
 Name			· · · · · · · · · · · · · · · · · · ·	- Manual Control of the Control of t	On which line in Part 1 did you enter the creditor?
110.1110					Last 4 digits of account number
Numbe	er Street				-
				· · ·	-
City		· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	-
Oity	n garan na haragan na haran n	s e presidente, imperior parties e prostatores entre prostatores.	olale ***********************************	ZIF CODE	TO THE POST OF T
		<del></del>		UNIXAD VICTOR AND	On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Numbe	r Street		· · · · · · · · · · · · · · · · · · ·		-
					~
***************************************	**************************************			***************************************	_
City	managa dan ka managa manag	eterragional tipotes especially a signa especialist especial	State	ZIP Code	Ред так — майорительная выполнения в
					On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Numbe	r Street				-
					_
City	e dengde e de segiste og hang støyten gitt egen støg steds bykats	A particular productive a primar from the engine of the en	State	ZIP Code	1981 1983 - Shika Shika Mizakida kaya Nadada mamada kata ka kife kega 1984 19.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.
					On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Number	r Street		<del></del>	·	· •
****					-
City	25,4E-5 (2-26-5 12-26-5 +45-6-5); (1-5-6 +4-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6-6	**************************************	State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Number	r Street		***************************************		
	_,,				
		<u> </u>			•
City			State	ZIP Code	

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Fill ir	i this i	nformation	to identify you	r case:							
Debto	r 1		ga Ka-aqua								
Debto	r 2	First Name		Middle Name		Last Name					
		First Name		Middle Name		Last Name					
United	States	Bankruptcy C	Court for the: North	hern District of	Illinois						
Case i	number wn)							***************************************			Check if this is an amended filing
							······································				amended liling
		Form 1	***************************************								
Stat	tem	ent of	Financi	al Affai	rs for	Indiv	/id	uals Filing	for Ba	nkruptcy	12/15
intorma	ation. r (if kn	If more spa own). Ansv	ice is needed, a ver every quest	ittach a separa ion.	ite sheet	to this for	rm. (	gether, both are eq On the top of any ac	ually respons Iditional pag	sible for supplyir es, write your na	ng correct me and case
Part	in G	ive Detai	ls About You	r Marital Sta	tus and	Where Y	ou	Lived Before			
1. Wh	at is y	our current	t marital status	?							
	Marrie										
Z	Not m	arried									
$\square$	No Yes. L		rs, have you live		ears. Do	not include	e wh	ere you live now.	WW.		Dates Debtor 2 lived there
								Same as Debtor 1			Same as Debtor 1
	<b>N</b> 1				From						From
	Num	iber Stre	et		То			Number Street			То
	•										
	City		State	ZIP Code				City	Ctoto	71D Code	
							_	•	State	ZIP Code	
							u	Same as Debtor 1			Same as Debtor 1
	Num	ber Stree	et		From			Number Street			From
					To			Number Street			То
	City		State	ZIP Code				City	State	ZIP Code	
stati <b>⊻</b>	es and No	territories (f	s, <b>did you ever</b> nclude Arizona, u fill out <i>Schedu</i>	California, Idan	o, Louisia	ina, Nevad	a, N	nt in a community p ew Mexico, Puerto R 6H).	roperty state ico, Texas, W	or territory? (Co /ashington, and V	ommunity property Visconsin.)
Dom 2	   ₌										
Part 2	Ext	piain the S	ources of Yo	ur Income							

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First Name Middle Name La	st Name			
Did you have any income from employme	ent or from operating a bu	usiness during this yea	er or the two previous cale	ndar years?
Fill in the total amount of income you receive If you are filing a joint case and you have income	ed from all jobs and all bus	inesses, includina part-ti	ime activities	•
☐ No ☐ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$24,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	\$ 27,000.00	Wages, commissions, bonuses, tips	e
(January 1 to December 31, 2015	Operating a business	¥	Operating a business	Ð
For the calendar year before that:	Wages, commissions, bonuses, tips		☐ Wages, commissions,	
(January 1 to December 31, 2014	Operating a business	\$ <u>25,615.00</u>	bonuses, tips	\$
Did you receive any other income during to income regardless of whether that income the income regardless of whether that income incoment, and other public benefit payment.	his year or the two previo	of other income are alim	money collected from laws:	lits: rovaities: and
Did you receive any other income during to include income regardless of whether that incure many other public benefit paying gambling and lottery winnings. If you are filing a list each source and the gross income from a	his year or the two previo come is taxable. Examples nents; pensions; rental inco g a joint case and you have	of other income are alim me; interest; dividends; i income that you receive	nony; child support; Social S money collected from lawsued together, list it only once	lits: rovaities: and
Did you receive any other income during to include income regardless of whether that incure members and other public benefit paying ambling and lottery winnings. If you are filing the cach source and the gross income from each	his year or the two previo come is taxable. Examples nents; pensions; rental inco g a joint case and you have	of other income are alim me; interest; dividends; i income that you receive	nony; child support; Social S money collected from lawsued together, list it only once	lits: rovaities: and
Did you receive any other income during to include income regardless of whether that incure members and other public benefit paying ambling and lottery winnings. If you are filing this ist each source and the gross income from a No	his year or the two previous come is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do	of other income are alim me; interest; dividends; i income that you receive	nony; child support; Social S money collected from lawsued together, list it only once you listed in line 4.	lits: rovaities: and
Did you receive any other income during to include income regardless of whether that incure many other public benefit paying gambling and lottery winnings. If you are filing a list each source and the gross income from a	his year or the two previous come is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do  Debtor 1  Sources of income Describe below.	of other income are alim me; interest; dividends; i income that you receive not include income that  Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions)
Did you receive any other income during to include income regardless of whether that income properties and other public benefit paying pambling and lottery winnings. If you are filing it each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until	his year or the two previous come is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do  Debtor 1  Sources of income Describe below.	of other income are alim me; interest; dividends; i income that you receive not include income that  Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsued together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions)
Did you receive any other income during to include income regardless of whether that income properties and other public benefit paying ambling and lottery winnings. If you are filing it each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until	his year or the two previous come is taxable. Examples ments; pensions; rental incog a joint case and you have each source separately. Do  Debtor 1  Sources of income Describe below.	of other income are alim me; interest; dividends; i income that you receive not include income that  Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions)
Did you receive any other income during to include income regardless of whether that incomendation and other public benefit paying pambling and lottery winnings. If you are filing it each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	his year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1  Sources of income Describe below.	of other income are alim me; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions)
Did you receive any other income during to include income regardless of whether that income properties and other public benefit paying ambling and lottery winnings. If you are filing it each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	his year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1  Sources of income Describe below.	of other income are alim me; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions)
Did you receive any other income during to include income regardless of whether that incurrently many and other public benefit paying ambling and lottery winnings. If you are filing the cach source and the gross income from a source and the gross income from a source. The cache is the cache source and the gross income from a sour	his year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1  Sources of income Describe below.	of other income are alim me; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions)

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(55544445)									
rt 3:	List Certai	1 Payme	ents You	Made Befo	re You Filed	for Bankruptcy	<u> </u>		
				•	consumer deb				
<b>∟</b> No.	"incurred by	an individ	lual primari	ily for a perso	nal, family, or f	ebts. Consumer de nousehold purpose ay any creditor a to		efined in 11 U.S.C. § 101(	(8) as
			nore you in	ed for bankre	ipicy, did you p	ay any orcator a to	rtar or 40,2	220 Of More:	
	₩ No. Go t								
	tota chil	l amount d support	you paid the and alimore	nat creditor. D ny. Also, do n	o not include p ot include payr	ayments for domes nents to an attorne	stic suppo y for this t	nore payments and the ort obligations, such as bankruptcy case. the date of adjustment.	
Z Yes	. Debtor 1 or	Debtor 2	or both ha	ave primarily	consumer de	bts.			
						ay any creditor a to	tal of \$60	0 or more?	
	No. Go to								
	Yes. List	below ea litor. Do n	not include	payments for	domestic supp	ort obligations, suc	ch as chìld	amount you paid that d support and	
	alim	ony. Also	o, do not inc	clude bavmer	ite to an attorna	ey for this bankrupt	cy case.	-	
					no to an attorne				
				, ,	Dates of payment	Total amount pai	d	Amount you still owe	Was this payment for.
					Dates of	Total amount pai	id	Amount you still owe	the high to the test
	Creditor's	Name			Dates of	Total amount pai	d \$	Amount you still owe	Was this payment for.  Mortgage  Car
	<u> </u>				Dates of	Total amount pai	s	Amount you still owe	☐ Mortgage
	Creditor's	Name			Dates of	Total amount pai	s \$	Amount you still owe	☐ Mortgage ☐ Car ☐ Credit card
	<u> </u>				Dates of	Total amount pai	s \$	Amount you still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Number		Slate		Dates of	Total amount pai	s \$	Amount you still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor
	<u> </u>		State	ZIP Code	Dates of	Total amount pai	id \$	Amount you still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Number		State		Dates of	\$	s \$	Amount you still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other
	Number	Street	State		Dates of	Total amount pai	s \$	Amount you still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage
	Number City Creditor's	Street	State		Dates of	\$	s \$	Amount you still owe	
	Number	Street	State		Dates of	\$	s \$	Amount you still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card
	Number City Creditor's	Street	State		Dates of	\$	s \$	Amount you still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
	Number  City  Creditor's	Street		ZIP Code	Dates of	\$	s \$	Amount you still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
	Number City Creditor's	Street	State		Dates of	\$	s \$	Amount you still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
	Number  City  Creditor's	Street		ZIP Code	Dates of	\$\$	s \$	Amount you still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
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	City  Creditor's  Number	Street Street		ZIP Code	Dates of	\$	\$\$		Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor
	City  Creditor's  Number  City  Creditor's	Street Street		ZIP Code	Dates of	\$	\$\$		Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Other Mortgage
	City  Creditor's  Number  City  Creditor's	Name Street		ZIP Code	Dates of	\$	\$\$		Mortgage Car Credit card Loan repayment Suppliers or vendor Other Car Credit card Loan repayment Suppliers or vendor Cother Credit card Cother
	City  Creditor's  Number  City  Creditor's	Name Street		ZIP Code	Dates of	\$	\$\$		Mortgage Car Credit card Loan repayment Suppliers or vendor Other Credit card Loan repayment Suppliers or vendor Other Credit card Loan repayment Suppliers or vendor Other Other Credit card Credit card Credit card Credit card

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or 1	Khaneidga Ka-aqua Harris First Name Middle Name Last Name		<del></del>	Case number (if known)	<u> </u>	
Inside corpo agent such	in 1 year before you filed for bankruptcy, did yers include your relatives; any general partners; orations of which you are an officer, director, perst, including one for a business you operate as a sas child support and alimony.	relatives of any son in control,	y general partners; p or owner of 20% or i	eartnerships of whice more of their voting	th you are a general partner securities; and any manag	ing
<b>2</b> N	lo es. List all payments to an insider.					
<b>-</b>	es. List all payments to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
i	Insider's Name		\$	\$		
ĵ	Number Street	-				
ō	City State ZIP Code					
ī	insider's Name		\$	\$	The second section of the second section of the second section	
ĭ	Number Street					
-	City State ZIP Code					
n ins Iclud	n 1 year before you filed for bankruptcy, did yo sider? e payments on debts guaranteed or cosigned by o es. List all payments that benefited an insider.		payments or transf  Total amount paid	er any property of Amount you still owe	n account of a debt that b Reason for this payment Include creditor's name	enefited
Īr	nsider's Name	****	\$	\$		
N	lumber Street			had A and a constraint of the second of the		
- c	Sity State ZIP Code	-		Tree and the control of the control		
			``	\$		
In	nsider's Name					
N	lumber Street					
-		<del></del>				
C	ity State ZIP Code					

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Khaneidga Ka-aqua Harris

Debtor 1

hin 1 year before you filed for bankruptcy, vall such matters, including personal injury cas contract disputes.	were you a party in any lawsui es, small claims actions, divorce	t, court action, or administrative proceed es, collection suits, paternity actions, suppo	ding? rt or custody modifi
No			
Yes. Fill in the details.			
Na	ture of the case	Court or agency	Status of the ca
Case title		Court Name	— 🔲 Pending
			On appeal
		Number Street	Concluded
Case number		Cit. 212 0	·
		City State ZIP Code	
Case title		O N	— 🔲 Pending
		Court Name	On appeal
		Number Street	Concluded
Case number			
		City State ZIP Code	_
ck all that apply and fill in the details below.  lo. Go to line 11.  'es. Fill in the information below.	ar any or your property repor	sessed, foreclosed, garnished, attached	i, seizea, or ieviea
ck all that apply and fill in the details below.  Jo. Go to line 11.	Describe the property	Date	; · · · · ·
ck all that apply and fill in the details below.  Jo. Go to line 11.	the second second	GUNANTA NAKARA KRAMITU DIRA	; · · · · ·
ck all that apply and fill in the details below.  Jo. Go to line 11.	the second second	GUNANTA NAKARA KRAMITU DIRA	
ck all that apply and fill in the details below.  Jo. Go to line 11.  Yes. Fill in the information below.	the second second	GUNANTA NAKARA KRAMITU DIRA	
ck all that apply and fill in the details below.  Jo. Go to line 11.  Yes. Fill in the information below.	the second second	GUNANTA NAKARA KRAMITU DIRA	; · · · · ·
ck all that apply and fill in the details below.  lo. Go to line 11,  'es. Fill in the information below.  Creditor's Name	Describe the property  Explain what happened Property was reposs	Date	; · · · · ·
ck all that apply and fill in the details below.  lo. Go to line 11,  'es. Fill in the information below.  Creditor's Name	Explain what happened Property was reposs Property was forecto	Date  essed. ssed.	; · · · · ·
ck all that apply and fill in the details below.  lo. Go to line 11,  'es. Fill in the information below.  Creditor's Name	Explain what happened Property was reposs Property was foreclo	Date  essed. sed. led.	; · · · · ·
ck all that apply and fill in the details below.  Io. Go to fine 11.  'es. Fill in the information below.  Creditor's Name  Number Street	Explain what happened Property was reposs Property was forecto	essed. sed. ed. ed, seized, or levied.	Value of the propel
ck all that apply and fill in the details below.  Io. Go to fine 11.  'es. Fill in the information below.  Creditor's Name  Number Street	Explain what happened Property was reposs Property was forecto Property was garnish Property was attache	Date  essed. sed. led.	Value of the propel
ck all that apply and fill in the details below.  Io. Go to fine 11.  'es. Fill in the information below.  Creditor's Name  Number Street	Explain what happened Property was reposs Property was forecto Property was garnish Property was attache	essed. sed. ed. ed, seized, or levied.	Value of the proper
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ck all that apply and fill in the details below.  lo. Go to line 11.  res. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Code  Creditor's Name	Explain what happened Property was reposs Property was forecto Property was garnish Property was attache	essed. sed. led. id, seized, or levied.  Date	Value of the proper
ck all that apply and fill in the details below.  Io. Go to line 11,  Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Code	Explain what happened Property was reposs Property was forecto Property was garnish Property was attache	essed. sed. ed. ed, seized, or levied.	Value of the proper
ck all that apply and fill in the details below.  lo. Go to line 11.  res. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Code  Creditor's Name	Explain what happened Property was reposs Property was forecto Property was garnish Property was attache Describe the property  Explain what happened Property was reposse	essed. sed. ed. ed, seized, or levied. Date	Value of the proper
ck all that apply and fill in the details below.  lo. Go to line 11.  res. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Code  Creditor's Name	Explain what happened Property was reposs Property was garnish Property was attache Describe the property  Explain what happened Property was reposse Property was reposse Property was reposse	essed. sed. ed. pate  Date  Date	Value of the proper
ck all that apply and fill in the details below.  lo. Go to line 11.  res. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Code  Creditor's Name	Explain what happened Property was reposs Property was forecto Property was garnish Property was attache Describe the property  Explain what happened Property was reposse	essed. sed. ied. id, seized, or levied.  Date  Date  essed. sed. sed. sed. sed. sed.	Value of the proper

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First Name Middle Name Last Name  hin 90 days before you filed for bankruptcy, did any creditor,	1
hin 90 days before you filed for bankruptcy, did any creditor,	
hin 90 days before you filed for bankruptcy, did any creditor,	
counto ne enfuna ta malca a marimant basarias ciari accidir della	, including a bank or financial institution, set off any amounts from your
counts or refuse to make a payment because you owed a deb No	n?
Yes. Fill in the details.	
the state of the s	in the state of th
Describe the action the	he creditor took Date action Amount was taken
Creditor's Name	The Control of the Co
	\$
Number Street	
	MINISTER CONTRACTOR OF THE PROPERTY OF THE PRO
City State ZIP Code Last 4 digits of accou	unt number: XXXX
hin 1 year before you filed for bankruptcy, was any of your pr	roperty in the possession of an assignee for the benefit of
ditors, a court-appointed receiver, a custodian, or another off	ficial?
No	
Yes	
List Certain Gifts and Contributions	
nin 2 years before you filed for bankruptcy, did you give any g	gifts with a total value of more than \$600 per person?
No	
Yes. Fill in the details for each gift.	
	Makaki sa manakan manahan manahan menangan menangan menangan salah menangan menangan sebagai sebagai sebagai s
Gifts with a total value of more than \$600 Describe the gifts per person	Dates you gave Value the gifts
A STATE OF THE STA	The Control of the Co
Person to Whom You Gave the Gift	
7 - 1990 AND	<u> </u>
Jumber Street	
number Street :	
Dity State ZIP Code	
Person's relationship to you	
The state of the s	
Gifts with a total value of more than \$600 Describe the gifts person	Dates you gave Value the gifts
	<b>s</b>
Person to Whom You Gave the Gift	<u> </u>
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GISON TO TYPION FOU GRACE CITE CITE	•
GIOTH O THINH TOU GAYS URE GIR	<b>s</b>
	<b>\$</b>
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	<u> </u>

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1 Khaneidga Ka-aqua Harris	Case number (if known)_	
ithin 2 years before you filed for bankr	uptcy, did you give any gifts or contributions with a total valu	e of more than \$600 to any charity?
No		
Yes. Fill in the details for each gift or co	ntribution.	
	And the state of the second section of the section of the second section of the section of the second section of the s	. The state of the state of the state of
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you Value contributed
	100 (A. 1.) (A. 1.) (A. 1.) (A. 1.) (A. 1.) (A. 1.)	
Charity's Name		<u> </u>
Charty 3 Wallo		
	_	<u> </u>
Number Street		
	:	
City State ZIP Code	<b></b>	
		i
Elst Certain Losses		
	ptcy or since you filed for bankruptcy, did you lose anything	because of theft, fire, other
saster, or gambling?		
No		
Yes. Fill in the details.		
A STATE OF THE STA	en e	
Describe the property you lost and	Describe any insurance coverage for the loss	Date of your Value of property
how the loss occurred	Include the amount that insurance has paid. List pending insurance	loss
	claims on line 33 of Schedule A/B: Property.	
		•
		1 V 3
List Certain Payments or Tra	nsfers	
thin 1 year before you filed for bankru	otcy, did you or anyone else acting on your behalf pay or tran	sfer any property to anyone
u consulted about seeking bankruptcy		
	reparers, or credit counseling agencies for services required in yo	our bankruptcy.
No		
Yes. Fill in the details.		
100. I m iii tiie detailo.	12 N 2 Section 2012 (1997)	gentsexecuter agent in our of the
	Description and value of any property transferred	Date payment or Amount of payment
Person Who Was Paid		transfer was made
, 0.03., 1110 11 <u>2</u> 0 , a.u.		
Number Street		\$
		Ψ <u></u>
<del></del>		•
		5
City State ZIP Code	,	
Email or website address		
Person Who Made the Payment, if Not You		

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1 Khaneidga Ka-aqua Harris	Warmen control of the	Case number (if known)		
First Name Middle Name Last	t Name			
	Description and value of any property tr	ansferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street	•			
	-			\$
City State ZIP Code	•			
Email or website address				
Person Who Made the Payment, if Not You				
oromised to help you deal with your credi Do not include any payment or transfer that y		1013 i		
Yes. Fill in the details.	garage and the state of the sta	en e	and the state	gent of the second
	Description and value of any property tr	ansferred	Date payment or transfer was made	Amount of payn
Person Who Was Paid			inage ·	
Number Street	-	**************************************	And the second s	\$
	-		WARRANT	\$
City State ZIP Code	•			
Nithin 2 years before you filed for bankrup ransferred in the ordinary course of your notude both outright transfers and transfers to not include gifts and transfers that you haw No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of		ortgage on your prop	
	transferred	or debts paid in exchan	ige (	was made
Described President Transfer				
Person Who Received Transfer				
Person Who Received Transfer  Number Street				
Number Street				
Number Street  City State ZIP Code  Person's relationship to you				
Number Street  City State ZIP Code  Person's relationship to you				
Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer				

Official Form 107

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	Khaneidga Ka-aqua Harris		Case number (if know		
	First Name Middle Name Las	t Name			
					•
Withi	s 10 years before you filed for banks	undana alial wasa kumundan anna mana			
are a	n 10 years before you filed for bankro beneficiary? (These are often called a	uptcy, did you transfer any prop asset-profection devices \	erty to a self-settled trust	t or similar device of t	which you
<b>Z</b> ÍN		, , , , , , , , , , , , , , , , , , , ,			
	es. Fill in the details.				
	os. i in in the details.	No.	The second of th	en e	
		Description and value of the pro	perty transferred		Date transfer
		- Greek William Mill (N. 1977)			was made
Nie	ame of trust	•			
146		······ !			
		- [	Complete and the complete control of the first control of the cont	······································	
******		Platic was the lines and gallows for imposes to graph of the behavior of munch, don't minor of munch as the security square for the security of the security o	de la	there again, the femous traps are not with a trips of a section to be considerable range for consensy as we wan	Professional Administration of the American front transformation accommon and transformation of the American front and the American front accommon
rt 8:	List Certain Financial Account	s, Instruments, Safe Depos	t Boxes, and Storage	Units	
Withir	n 1 year before you filed for bankrup	cv. were any financial accounts	or instruments held in v	OUE name, or for your	hanofit
close	d, sold, moved, or transferred?	oy, noto any intended accounts	or monaments neta at y	our name, or for your	benefit,
Includ	de checking, savings, money market,	or other financial accounts; ce	tificates of deposit; share	es in banks, credit un	nions.
broke	rage houses, pension funds, cooper	atives, associations, and other t	inancial institutions.		,
☑ No					
☐ Ye	es. Fill in the details.				
		the state of the s		The second of the second of the second	and the second of the second
		Last 4 digits of account number	Type of account or	Date account was	Last balance befo
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	
		Last 4 digits of account number			
N	ame of Financial Institution	CELL HANGE	instrument	closed, sold, moved,	
_		Last 4 digits of account number	instrument  Checking	closed, sold, moved,	
_	ame of Financial Institution	CELL HANGE	instrument  Checking Savings	closed, sold, moved,	
_		CELL HANGE	instrument  Checking Savings Money market	closed, sold, moved,	
N 		CELL HANGE	Checking Savings Money market Brokerage	closed, sold, moved,	
N 	umber Street	CELL HANGE	instrument  Checking Savings Money market	closed, sold, moved,	
N 	umber Street	xxxx	instrument  Checking Savings Money market Brokerage Other	closed, sold, moved,	
N C	umber Street	CELL HANGE	instrument  Checking Savings Money market Brokerage Other	closed, sold, moved,	
N Ci	ity State ZIP Code	xxxx	instrument  Checking Savings Money market Brokerage Other Checking Savings	closed, sold, moved,	
N Ci	umber Street  ity State ZIP Code	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market	closed, sold, moved,	
N Ci	ity State ZIP Code	xxxx	instrument  Checking Savings Money market Brokerage Other Checking Savings	closed, sold, moved,	
Ni Ni	ify State ZIP Code  ame of Financial Institution	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market	closed, sold, moved,	
N CC	ity State ZIP Code	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved,	
Ni Ni	ity State ZIP Code	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved,	
No you	umber Street  ity State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$\$
Na N	umber Street  ity State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$\$
No.	umber Street  ify State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	ss
No you securit	umber Street  ity State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?	XXXXXXXXyear before you filed for bankru	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$\$
No you securit	umber Street  ify State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?	xxxx	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$\$  for
No you securit	umber Street  ify State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?	XXXXXXXXyear before you filed for bankru	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$\$  for  Do you still have it?
Do you securit	umber Street  lity State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?  s. Fill in the details.	XXXXXXXXyear before you filed for bankru	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$
Do you securit	umber Street  ify State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?	XXXXXXXXyear before you filed for bankru	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	Do you still have it?
No you securit	umber Street  lity State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?  s. Fill in the details.	XXXX	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$
No Yes	umber Street  lity State ZIP Code  ame of Financial Institution  umber Street  ty State ZIP Code  u now have, or did you have within 1 ties, cash, or other valuables?  s. Fill in the details.	XXXX	Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage Other	closed, sold, moved, or transferred	\$

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Debtor 1	Khaneidga Ka-aqua Harris First Name Middle Name L	ast Name	Case number (if known)
22. Have	you stored property in a storage un	it or place other than your home within 1	year before you filed for bankruptcy?
MT I	No .		• •
u \	es. Fill in the details.		
		Who else has or had access to it?	Describe the contents Do you still have it?
	Name of Storage Facility	Name	No ☐ Yes
			□ res
	Number Street	Number Street	
		City State ZIP Code	<del></del>
	City State ZIP Code	<u>.</u>	
Part 9	Identify Property You Hold	or Control for Someone Else	
23. Do y	ou hold or control any property that	someone else owns? include any propert	y you borrowed from are storing for
or h	old in trust for someone.	, , , , , , , , , , , , , , , , , , ,	y you sollowed hold, are storing for,
<u> </u>			
<b>U</b> 1	es. Fill in the details.		
		Where is the property?	Describe the property Value
	Owner's Name		\$
	Number Street	Number Street	
	unimer Street		
			R-1-1-1 
	City State ZIP Code	City State ZIP Code	NAME AND ADDRESS OF THE ADDRESS OF T
Part 10	Give Details About Environ		***************************************
	9488		
	purpose of Part 10, the following defi		
naza	rdous or toxic substances, wastes, o	ite, or local statute or regulation concerni or material into the air, land, soil, surface v ing the cleanup of these substances, was	vater, groundwater, or other medium
Site r		rty as defined under any environmental la	
<i> naza.</i> subs	<i>rdous material</i> means anything an er tance, hazardous material, pollutant,	ovironmental law defines as a hazardous v contaminant, or similar term.	waste, hazardous substance, toxic
		that you know about, regardless of wher	n they occurred.
24. Has a	ny governmental unit notified you the	at you may be liable or potentially liable u	nder or in violation of an environmental law?
<b>⊠</b> №	•		,
_	es. Fill in the details.		
	o. Till ill the details.	<u> </u>	
		Governmental unit Enviro	nmental law, if you know it Date of notice
Na Na	me of site	Governmental unit	
•			;
Nu	mber Street	Number Street	
		City State ZIP Code	
Cit	V C646 715 Cal-		
VII.	y State ZIP Code		

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btor 1	Khaneldga Ka-aqua Harris	No. of the contract of the con	Case number	(if known)	
	First Name Middle Name Last	Name			
se blas		£	10		
.э. пач <b>У</b>	ve you notified any governmental unit o	or any release or nazardous materia	U <i>?</i>		
	Yes. Fill in the details.				
		Governmental unit	Environmental lav	w, if you know it	Date of notice
		• • • • • • • • • • • • • • • • • • • •		Section 1. Section 2.	
	Name of site	Governmental unit			
		Overmontal dist		Тамба ^м улгайстаг 1 ₂ 55-ү 5 ү 156-ж уу 156-кү 155-кү 5у	
	Number Street	Number Street			
		City State ZIP Code			
	Marie 1	ony out in bode			
	City State ZIP Code				
. Hav	e you been a party in any judicial or ad	ministrative proceeding under any	environmental la	w? include settlements and o	rders.
	No				
	Yes. Fill in the details.	the state of the s	ening space and the	enter the first seems of all and	*:
		Court or agency	Nature of the	case	Status of the case
	Case title	_			
		Court Name	<del></del>		Pending
			·		On appeal
		Number Street			☐ Concluded
	Case number	City State ZIP Code			
		•			
art 1	Give Details About Your Bus	iness or Connections to Any i	Business		
. Witi	nin 4 years before you filed for bankrup	tcy, did you own a business or hav	e any of the follo	owing connections to any bus	iness?
į	A sole proprietor or self-employed i	in a trade, profession, or other acti	vity, either full-tin	ne or part-time	
	<ul> <li>A member of a limited liability comp</li> <li>A partner in a partnership</li> </ul>	pany (LLC) or limited liability partne	ership (LLP)		
	<ul><li>A partner in a partnership</li><li>An officer, director, or managing ex</li></ul>	ecutive of a cornoration			
	An owner of at least 5% of the votin		ion		
	No. None of the above applies. Go to Pa Yes. Check all that apply above and fill		000		
		Describe the nature of the business		Employer Identification number	ACTION OF
	Business Name			Do not include Social Security no	umber or ITIN.
				EIN: -	
	Number Street				A Secretary of the second
		Name of accountant or bookkeeper		Dates business existed	Standards Age
				From To	
	City State ZIP Code				**
		Describe the nature of the business		Employer Identification number	A CONTRACTOR OF THE CONTRACTOR
	Business Name			Do not include Social Security no	imber or ITIN.
			a i i i i i i i i i i i i i i i i i i i	EIN:	
	Number Street	Name of accountant or bookkeeper		Dates business existed	
	<u> </u>		And the second s		•
				From To	=

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btor 1	Khaneidga Ka-aqua Harris	Case number	(if known)
	First Name Middle Name Las	t Name	
		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
	Business Name	-	EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
		- :	From To
	City State ZIP Code		
8. With	nin 2 years before you filed for bankru	ptcy, did you give a financial statement to anyone at	oout your business? Include all financial
insti	itutions, creditors, or other parties.		•
Z N	No Yes. Fill in the details below.		
	res. I in the details selon.	Date issued	
		ego (Messa MA)	
	Name	MM / DD / YYYY	
	Number Street	-	
		_	
		_	
	City State ZIP Code	-	
	City State ZIP Code		
	City State ZIP Code	-	
art 12	*		
I ha ans in o	2.1 Sign Below  ave read the answers on this Statemes swers are true and correct, I understa	nt of Financial Affairs and any attachments, and I dend that making a false statement, concealing proper n result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud
I ha ans in c 18	Sign Below  ave read the answers on this Statemers are true and correct. I understate connection with a bankruptcy case call. U.S.C. §§ 152, 1341, 1519, and 3671.  Khapleidga Ka-aqua Harris signature of Debtor 1  Date 01/13/2016	nd that making a false statement, concealing proper n result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I ha ans in c 18	Sign Below  ave read the answers on this Statemers are true and correct. I understate connection with a bankruptcy case call. U.S.C. §§ 152, 1341, 1519, and 3671.  Khapleidga Ka-aqua Harris signature of Debtor 1  Date 01/13/2016	nd that making a false statement, concealing proper n result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I ha ans in c 18	Sign Below  ave read the answers on this Statemers are true and correct. I understate connection with a bankruptcy case call. U.S.C. §§ 152, 1341, 1519, and 3671.  Khapleidga Ka-aqua Harris signature of Debtor 1  Date 01/13/2016	nd that making a false statement, concealing proper n result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I has anso in co 188	sve read the answers on this Statemers are true and correct. I understate connection with a bankruptcy case call. S.C. \$6.157, 1341, 1519, and 3571.  Khapleidga Ka-aqua Harris Signature of Debtor 1  Date 01/13/2016 I you attach additional pages to Your No Yes  I you pay or agree to pay someone who	nd that making a false statement, concealing proper n result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I had ansign of 18 in	Sign Below  ave read the answers on this Statemers were are true and correct. I understate connection with a bankruptcy case call. S.C. \$6 15Z, 1341 1519, and 3571.  Khaneidga Ka-aqua Harris Signature of Debtor 1  Date 01/13/2016 I you attach additional pages to Your No Yes  I you pay or agree to pay someone who	nd that making a false statement, concealing proper in result in fines up to \$250,000, or imprisonment for  Signature of Debtor 2  Date  Statement of Financial Affairs for Individuals Filing for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not an attorney to help you fill out bankruptcy for its not at a transfer its not attorney to help you fill out bankruptcy for its not attorney to help you fill out bankruptcy for its not at a transfer its not a transfer its not at a transfer its not a tran	ty, or obtaining money or property by fraud up to 20 years, or both.

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Fill in this in	formation to ide	entify your case:		
Debtor 1	Khaneidga K			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	Eirst Name	EA: 4.0 - E.)	L. A. M.	
(Spouse, a mang)	ristivame	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern District of III	linois	
Case number (If known)		** ***********************************	**************************************	

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that Did you claim the propert secures a debt? Did you claim the propert as exempt on Schedule C	
Creditor's name: Credit acceptance	☐ Surrender the property.	☑ No
<u> Annon de la comencia del la comencia del la comencia de  la comencia de  la comen</u>	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	✓ Retain the property and [explain]: continue making payments	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	

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Debtor 1

Khaneidga Ka-qua Harris

Case number (If known)_

or any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ided. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).		
Describe your unexpired personal property leases	Will the lease be assumed?	
Lessor's name:	□ No	
Description of leased property:		
Lessor's name:	□ No	
Description of leased property:	☐ Yes	
Lessor's name:	□ No	
Description of leased property:	Yes	
essor's name:	· □ No	
Description of leased property:	Yes	
_essor's name:	□ No	
Description of leased property:	Yes	
Lessor's name:	□No	
Description of leased property:	Yes	
_essor's name:	□ No	
Description of leased property:	☐ Yes	
3: Sign Below		

Signature of Debtor 2

Date MM / DD / YYYY